

CHEMIST & DRUGGIST

The newsweekly for pharmacy

March 27, 1993

OVER THE COUNTER INSIDE

TRIAL OF STRENGTH



- Strong promotion – free consumer trial
- Strong performance – unbeaten protection against wetness and odour
- Strong pack design
- Strong sales!

Total Confidence is Body Mist



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PSNC in PR push against DoH offer...

...Society asks Department to 'think again'...

...and LPCs react strongly

Croydon's milk scheme is abandoned

Make PSNC accountable to all: Tanna

Practice makes perfect for Mr M's pharmacy

NHS contract problems in NI

Unichem reach £1bn sales

Stock It.

Very few products are able to boast sales ~~over £100 million~~ ~~in the UK~~,

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Sun E45 (SPF 8, 15² and 25²) is an excellent choice for people with sun-sensitive skin.

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~~is changing~~; the supply is up to you.

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DERMATOLOGICAL PROTECTION FOR SUN-SENSITIVE SKIN

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Comment

"Watch my lips," Department of Health Under Secretary Melvyn Jeremiah appeared to say last week. "There is no hidden agenda on the part of the DoH to reduce the number of community pharmacies. Some people may conclude that it is not an economic business to be in any more." (C&D, March 20 p484). Well, if the Department has not been keeping its agenda hidden, then we suspect the Treasury has. Until now, that is, when it has become visible at last to PSNC. Pharmacy negotiators, it seems, have been kept in the dark over critical parts of the 1993-94 package since last Autumn (see p540) when the Department appeared to agree that 1,000 scripts a month would be an acceptable threshold for a £250 a month professional allowance. Chairman David Sharpe and PSNC continued to "negotiate" in good faith, only to receive Mr Jeremiah's short, sharp, take-it-or-leave-it-offer last week (March 20, pp484-485).

While it is easy to be wise after the event, PSNC's willingness to accept a hidden remuneration agenda last year was ill-advised, when as part of the delayed 1992-93 pay settlement, it accepted the principle of a two-year deal. What was then agreed in principle — moving this year to a professional allowance and away from

front-loading through the dispensing fee — became a veritable Trojan Horse when the Department reneged on their Autumn gentleman's agreement. The Department's two-year offer for 1993-95 has been found equally unacceptable. However, the one principle that PSNC has accepted seems bizarre — that the allowance will be paid month by month only when contractors pass a predetermined threshold level. Those contractors who do not pass "go" do not collect £500. The argument presumably is that if a contractor's average monthly scripts are stuck just below the trigger figure, he or she will get nothing. While it is understood there may be a little flexibility, how can any businessmen make plans when their livelihood depends on the very script numbers game the new professional payment was meant to banish? What price pharmacy business goodwill now?

Some 440 pharmacies took the Treasury's money (£24,000 on average) under the 1987-89 compensation scheme following contract limitation. This time the Treasury has run out of silver and many more closures are in the pipeline. Pharmacy contractors must support PSNC's PR push, adding their own voice at local level, or they will see no reward for their excellent public service.

Croydon LPC abandons welfare milk scheme

Croydon pharmacists have had to abandon a proposed welfare milk distribution scheme because the Department of Health will not reimburse the cost of the milks.

Over 40 contractors were willing to take part in the scheme, due to start on April 1, provided they were reimbursed £5.20 for a 900g pack — the average trade price for major brands listed in the *C&D Price List*. But the Department will pay only £4.75,

the amount reimbursed to district health authorities who effectively pay wholesale prices for products obtained through the NHS Supplies Authority.

Croydon LPC secretary Julie Short told *C&D* the offer was "ludicrous" because pharmacists in nearby Bromley were already being reimbursed £5.20. "It was clear that the Department wanted to discourage local arrangements and wait for a nationally

organised scheme," she said. The Department could then negotiate prices with manufacturers.

Pharmacists have received many inquiries from customers asking if they could redeem tokens. "Although as there is a lot of administration involved we agreed to provide the service without an administration fee, as we thought a fee might follow later when the national scheme is introduced," she said.

YPG hustings affect votes

Twenty six local branches of the Royal Pharmaceutical Society were represented at a Council elections hustings organised by the Young Pharmacists Group last weekend in Birmingham. Eighty six per cent of those attending said the event had altered their intended pattern of voting.

Last December the YPG contacted existing Council members who were up for re-election in May and invited them to the hustings. All RPSGB local branches were informed of the event and asked to notify the YPG if they were aware of any other candidates who were standing for election to the Society's Council.

By mid-March the YPG had heard from 13 candidates. Those who actually attended the hustings were Julian Ashley, Peter Curphey, Ian Caldwell, Linda Stone, Anne Lewis and Mary Tracey.

Candidates submitting a short policy statement, though not able to attend, were Alan Nathan, David Coleman, Noel Baumber, Geoff Booth and Pat Hoare. Candidates who did not attend and did not submit statements were David Allen and Alan Lloyd.

The hustings, to which 67 people turned up, lasted three hours. All candidates were asked to state what they felt were the three most serious challenges facing the profession. They were also asked to suggest what they would attempt to do if elected.

In the second part of the hustings questions submitted postally from numerous local branches were put to candidates. Those attending were also given this opportunity. Questions covered compulsory continuing education; the Department of Health's 1993-94 pay offer; competency assessment; and the effectiveness of local branches.

The YPG will be circulating all Society branches within the next two weeks with details of the hustings. The whole event was videoed and tapes will be made

available to branches on request. All of these factors go some way in achieving the overall objectives for the hustings set out in 1992, a YPG spokesman said afterwards.

PSG meeting

The Pharmacy Support Group meeting to discuss last week's Department of Health pay offer will be held this Sunday (March 28) at 2.30 for 3pm, Porchester Hall, Porchester Road, Bayswater, London W2.

The Middlesex Pharmaceutical Group has decided to postpone an open meeting which was to be held the same day and is advising contractors to attend the PSG meeting instead.

PSG founder Hemant Patel says he has invited several "heavyweight" speakers and expects the meeting to last about two hours.

New asthma guidelines

New asthma guidelines, co-ordinated by the British Thoracic Society, cover new treatments not considered in 1990 when the first set of guidelines were produced. Clearer descriptions are given, in the form of tables, of what represents control of asthma (defining it as elimination of symptoms) and emphasis is placed on guided self-management.

Necrodornil sodium and sodium cromoglycate have been added as first-line anti-inflammatory treatments. The guidelines recommend switching to inhaled steroids if control is not achieved with the non-steroidal drugs.

The guidelines recommend reserving salmeterol for adults whose asthma is not controlled by high dose inhaled steroids and short-acting bronchodilators for symptom relief, and only using it in children if therapy with inhaled steroids up to 800mcg daily has proved unsuccessful.

Reformed pharmacist admonished

A Dorset pharmacist whose life became "wretched" when he was made bankrupt, sued for divorce by his wife, and caught drink driving, avoided being struck off the Register last week after he provided evidence that his "dark days" were behind him.

The Statutory Committee of the Royal Pharmaceutical Society of Great Britain decided to admonish Mohan Dhariwall after he provided a favourable psychiatrist's report, references from two pharmacists and another from his local temple.

At an earlier hearing judgment had been postponed on Mr Dhariwall, of Branksome Hill Road, Bournemouth, to allow him to provide evidence that he was not now suffering from a drink problem.

He had been disqualified from driving for two years, ordered to pay £20 costs and given 40 hours community service after pleading guilty to driving with more than three and a half times the legal limit.

Josselyn Hill, solicitor to the Committee, told the resumed hearing that Kenyan-born Mr Dhariwall had been through a "desperate situation" with bankruptcy and his wife had sued for divorce a few days after he was declared bankrupt.

He had been driving a friend's car to look for locum work when he was involved in a minor accident and breath tested positive.

He pleaded guilty on December 13, 1991, at Winchester Magistrates Court, to drink driving.

In admonishing Mr Dhariwall, Committee chairman Gary Flather QC said he had provided all the information asked of him at the previous hearing. The Committee accepted that the drink driving was an isolated incident and that Mr Dhariwall was not an alcoholic.

Control of entry under DoH review

Dr Brian Mawhinney, the Health Minister, confirmed in the House of Commons on Monday that his Department is reviewing the impact of the pharmaceutical regulations on community pharmacists as part of the Government's wider initiative on deregulation.

He told Mrs Jacqui Lait (Con) that no decision had been made about the future of entry controls to pharmaceutical lists. Mrs Lait was seeking details on the number of pharmacies with which an FHSAs should have a contract for dispensing prescriptions in inner city areas.

Dr Mawhinney replied: "All patients should have access to a community pharmacy regardless of where they live. In considering applications for new pharmacies, FHSAs are required to take account of the level of provision already in the area."

Dr Mawhinney also stated that the Department was committed to simplifying the fee structure as part of its "restructuring of pharmacists' remuneration". He also said that FHSAs were expected to consult community health councils on applications to dispense NHS prescriptions.

- Baroness Cumberlege, the Junior Health Minister, told the House of Lords on Monday that since 1984 there have been 160 appeals from dispensing doctors under the regulations governing rural dispensing of which 151 had been determined. There had been 126 appeals from pharmacists of which 121 had been determined.
- A group of Labour backbench MPs, mainly representing mining constituencies, has tabled a Parliamentary motion expressing concern that the Government's proposals to extend the Selected List of medicines may add to the problems of those suffering from skin diseases.

Scottish rules change

The regulations have been amended in Scotland to enable a professional allowance to be paid to contractors who set aside an area of their pharmacy for the display of health education material, give advice and counselling on medicines, undergo clinical audit and, from April 1, produce a practice leaflet.

The NHS (General Medical and Pharmaceutical Services) (Scotland) Amendment Regulations 1993 (SI No 521 (S58), HMSO £1.55) also extend the range of patients for whom pharmacists may be paid for keeping medication records.

Application of change

The limitation of contract is keeping pharmacy numbers static and the price of businesses high. However, my concerns are that the prospects of younger pharmacists eventually owning their own businesses are now virtually negligible.

The large multiples, who have enough contracts already, are attempting to increase their numbers in lucrative sites by opening pharmacies without NHS contracts. Their aim is to eventually get dispensing contracts for all, as one multiple owner put it, "by a process of attrition".

Since the Cooper and Anglin judicial review, pharmacists who wish to oppose a contract application may, if the case goes to the National Appeal Panel, be forced to instruct legal counsel and pay for that pleasure.

The applicants simply wish to weaken the contractors' will to fight

This happened at three recent cases: one in Bangor and two in Belfast. All three appeals cost local contractors dearly, but by pulling together into a local action group they minimised the individual financial burden and, I suppose, for them it was money well spent since all three applications were successfully opposed.

The farce is, sadly, that in at least two of these cases, a fresh contract application is being planned by the original applicant, very probably subjecting local contractors to further costs. The applicants simply wish to weaken their resolve to fight. It is time that, where an application has been refused in a neighbourhood, no other contract application should be considered by the Pharmacy Practice Committee for that site unless substantial demographic changes have occurred or a defined time has elapsed, say five years.

This is only fair since when an application is successful and begins dispensing NHS scripts on behalf of the Board, local contractors are powerless to close it. The chairman of the National Appeals Panel has the power to reject an appeal, for or against a PPC decision, on the grounds that it is vexatious. This power should be extended to include obvious abuses of the present system. The only winners are the multiples and the legal profession.



Clarion call to arms over punitive pay offer!

The Department of Health must, by now, be well aware of the intense anger it has generated by its contemptuous treatment of community pharmacists: that anger can only help PSNC in its future negotiations.

In past years the *fait accompli* approach has prevented any discussion until it was too late, but this has changed this year under pressure from contractors and, from the evidence of last week's announcement, not a moment too soon!

Now is the time for us all to act. Now is the time to write to all MPs cataloguing the arrogant insults contained in this offer, and now is the time for all pharmaceutical organisations to talk with one voice.

By the time the Royal Pharmaceutical Society's working party on access to pharmaceutical services has reported it will be too late for many pharmacists, whose only reward for years of community service will be bankruptcy, the dole queue and no redundancy compensation. The RPSGB must now come off its non-interventionist fence, and join with the National Pharmaceutical Association.

PSNC and all contractors to stop this rape of our profession.

The Department thinks we have no teeth, but our outrage is genuine and with a united leadership it may find those teeth to be very sharp indeed. Our expectations are reasonable but our treatment cavalier, so without a just settlement there should be:

- no more payment to the Clothier fund
- no more participation in health promotion campaigns
- no more co-operation with FHSAs
- no more needle exchange and no more co-operation with the Prescription Pricing Authority.

In fact, we should wage a campaign of active disruption to any non-patient governmental organisation with which we deal.

We are not yet employed by the Department of Health and if it is unable to treat us in the same way as other health professions, then we will rapidly have to demonstrate our true independence!

Coffee and compliance

It's nice to learn that the world's most popular fix still comes from the coffee bean and that it is not only perfectly legal but also improves mental performance (Research Digest, March 20). I am all for improving my mental capacity and do admit to three cups in a working day, but being awash with coffee is not my idea of a realistic option to the problems of advancing senility!

In the same Update article the waste of resources from non-compliance in growth hormone therapy was analysed by specialists from London's Middlesex Hospital. At a cost of £100 per patient per day, this is a far more serious problem than overdosing on coffee but despite all the reasons given for non-compliance the role of the community pharmacist was never mentioned.

The Middlesex Hospital Group has, however, identified

the problem, and community pharmacists are in a unique position to help. We are in an ideal position to detect non-compliance, but we cannot become properly involved until we see the families regularly when they present their prescriptions.

At the moment most of these injections are supplied directly from surgeries and, whatever the reasons, the effect has been to remove one of the fail-safe system these children require in order to make satisfactory progress to normal adulthood.

City critics confounded

Lloyds Chemists have reported profits above expectation for the second half of 1992, which confounded their City critics but have pleased their shareholders (Business News, March 20, p521).

One of the divisions to achieve substantial growth was Barclay Enterprise, which now not only supplies the medicinal needs of Lloyds Chemist division, but also acts as a full-line wholesaler to independent pharmacists.

When it comes to a choice of wholesaler most independents have divided loyalties because both the national distributors — Unichem and AAH — are also in direct competition via their own rapidly expanding retail divisions. With Barclay this now makes three.

Barclay, in particular, have been attracting business by offering discounts that appear to be too good to miss, but in the long-term they are probably unsustainable.

Given a free choice I would prefer to trade with a full-line wholesaler who was truly independent of the retail sector. For me that is not a practical proposition, so I have decided to stay with the highly efficient "devil I know" rather than embrace the short-term blandishments of such an active competitor as Lloyds.

In my area the combined activities of Lloyds' pharmacies, drug stores and health food shops have provided far more competition than the Moss or Vantage outlets. The short-term gain I might make by changing allegiance must be offset by my natural disinclination to further improve the trading margins of my direct competitor.

Topical REFLECTIONS

Script specials

Once daily parental cephalosporin

Rocephin, a new cephalosporin from Roche Products, is the hydrated disodium salt of ceftriaxone. Rocephin has bactericidal activity against a wide range of Gram-positive and, more especially, Gram-negative organisms.

Its spectrum of activity includes both aerobic and some anaerobic species and it also has considerable stability against degradation by most bacterial beta-lactamases.

Rocephin has a relatively long plasma elimination half-life of approximately eight hours. Therefore, a once daily dose is appropriate for treating most patients.

Ceftriaxone's non-linear pharmacokinetics are due to binding to plasma protein which varies from 85 to 95 per cent in a dose dependent manner.

Ceftriaxone is widely distributed in tissues and body fluids. It can cross non-inflamed and inflamed meninges to produce therapeutic concentrations of the drug in the plasma.

About 60 per cent of a dose of ceftriaxone is eliminated unchanged in the urine, almost exclusively

by glomerular filtration. The remainder is excreted in the bile and is ultimately excreted in the faeces.

Product licence holder Roche Products Ltd, PO Box 8, Welwyn Garden City, Hertfordshire AL7 3AY

Presentation Vials containing 250mg, 1g or 2g ceftriaxone as the hydrated disodium salt. The crystalline powder is reconstituted with Water for Injection BP for intravenous administration or Lignocaine Hydrochloride Injection BP for intramuscular administration, giving a pale yellow to amber solution.

Preparation of solution The company recommends using freshly prepared solutions which maintain potency for at least six hours at room temperature in daylight, or 24 hours at 5°C.

Indications Pneumonia; septicaemia; meningitis; bone, skin and soft tissue infections; infections in neutropenic patients, gonorrhoea and peri-operative prophylaxis of infections associated with surgery.

Dosage Standard therapeutic dose for adults and children over 12 years is 1g once daily. In severe

infections this is increased to 2-4g daily. Dosages do not have to be adjusted in elderly patients provided that renal and hepatic function are satisfactory. In children under 12 years the standard dose is 20-50mg/Kg body weight once daily. Dosage and mode of injection (deep intra-muscular, slow intravenous or slow intravenous infusion) should be determined by the severity of the infection.

Contra-indications History of hypersensitivity to cephalosporin antibiotics. Premature infants and full-term infants during the first six weeks. Should not be used in pregnancy unless absolutely indicated.

Precautions Stated dose should not be exceeded. Caution required in patients who have previously shown hypersensitivity (especially anaphylactic reaction) to penicillins or other types of non-cephalosporin beta-lactam antibiotics as a few cases of cross-allergenicity have been recorded.

Side effects Gastro-intestinal side effects, consisting mainly of loose stools and diarrhoea or, occasionally nausea and vomiting.

are the most common reactions. Haemotological reactions. Headaches, dizziness are less common. See Data Sheet.

Legal category POM

Packs 250mg vials x 5 (£15), 1g vials x 5 (£60), 2g x 1 (£24)

Product licence number 250mg vial PL0031/0169, 1g vial PL0031/0171, 2g vial PL0031/0172

Issued March 1993

Colour change

There will be a change in both colour and markings of certain Evans and Kerfoot generic products due to a change in the source of supply, K

Pharmaceuticals say this will in no way impair the quality and presentation of the product. **K Pharmaceuticals. Tel: 0582 608308.**

Cyclophosphamide

Farmitalia Carlo Erba are increasing the pack size of injectable cyclophosphamide from the existing six vial pack to a ten vial pack. (100mg £10.55; 200mg £15.00; 500mg £26.16; 1g £45.82). **Farmitalia Carlo Erba Ltd. Tel: 0727 840041.**

Searle orders

Searle have moved their order office and all orders may now be placed on **Tel: 0494 521124 or Fax: 0494 536035**. This change affects the following divisions of GD Searle: **Searle Consumer; Searle Pharmaceuticals; Gold Cross Pharmaceuticals; Lorex Pharmaceuticals.**

More Norton

Baker Norton have extended their range of generics with two more products: Steri-Neb Salamol 5mg 20 x 2.5ml ampoules for nebulisation (£5.99); Triam-Co x 30 (£1.93). **Baker Norton Pharmaceuticals. Tel: 0279 426666.**

Arthrocare Helpline

Searle have launched a new helpline for people suffering from arthritis. The Arthrocare Helpline is manned by nurses from the Medical Advisory Service who will answer queries about the disease and where to obtain specific help, but not about treatments. The helpline operates Monday to Friday from 7pm to 9pm. **Tel: 081 994 9874.**

New BNF

The 25th British National Formulary (March 1993) is now available in bookshops or direct from The Pharmaceutical Press, Royal Pharmaceutical Society of Great Britain, price £10.95.

Flu — safety hazard in the work place

Influenza B slows human reaction times and could possibly endanger people's safety at work, concludes a report in the *British Medical Journal*. This confirms the findings of the Medical Research Common Cold Unit where flu impaired performance of the simple reaction time by about 20-40 per cent. Those with influenza B were not so ill that they were confined to bed, so the authors suggest that flu could possibly endanger safety at work.

Two studies, involving 178 volunteers, investigated the effects of influenza B on reaction times and other indicators.

Although memory, logical reasoning and hand-eye coordination were unimpaired, subjects had a slower reaction time in tests where they did not know when or where the stimulus would appear. They were also slower in repeated number detection tasks and less accurate in the categoric search task.

Synthetic malaria vaccine

The synthetic SPf66 malaria vaccine is safe, immunogenic and protective against *Plasmodium falciparum* malaria in semi-immune populations, according to a study in *The Lancet*.

The trial, to evaluate the efficacy of three doses of SPf66, was carried out on 1,548 volunteers in Columbia. SPf66 provided a protective efficacy of 33.6 per cent against first or only episodes of malaria and 38.8 per cent

against all episodes. Protection was highest among children aged one to four years (77.2 per cent) and adults over 45 (67 per cent).

The protective efficacy against second episodes was higher than against first, suggesting that its efficacy increased after a malaria episode. This did not decline over time, suggesting that protection lasts for up to a year after the third dose. There was a low incidence of side effects.

Cervical cancer: smoking link

Cigarette smoking has been indirectly linked with cervical cancer through the occurrence of oncogenic human papillomavirus, while cervical infection with human papillomavirus is important in the aetiology of neoplasia.

A study of 181 women with abnormal cervical cytology, published in the *BMJ*, found that the dose dependent effect of smoking on the occurrence of the virus favours a causal relation between these risk factors for cervical neoplasia.

The virus was found in 41 per cent of the 63 women who did not smoke, 58 per cent of the 38 who smoked one to ten cigarettes a day, 61 per cent of the 46 who smoked 11 to 20 and 76 per cent of the 34 who smoked over 21.

The presence of the virus in the non-smokers depended on their previous smoking habits — 61 per cent of the 23 who had once smoked at least ten a day, compared with 30 per cent of those who had never smoked at least ten cigarettes a day.



Sanatogen
is more than just the
big number
in multivitamins.

Sanatogen, the number 1 multivitamin brand, is now attracting more and more customers with a wider range of products.

Cod Liver Oil's the fastest growing brand in the market. Sanatogen, specifically formulated for teenage girls, opens up a huge new market for you. And we'll be spending more money than ever on TV.



Counterpoints

Step 2 for painless lice egg removal

Step 2 is a new headlice treatment from Dendron, designed for use after application of a pediculicide for easy removal of lice eggs.

In a creme rinse formulation, Step 2 does not kill the lice and eggs, but loosens the bond which attaches them to the hair, making removal easier. Studies have shown that the product makes the combing out process up to ten times faster, say Dendron. The product contains a conditioner to reduce tangles and will restore shine to hair, says the company. Active ingredients in the product include buffered organic acid pH4.

Retailing at £3.45 (100ml), Step 2 comes complete with a fine-tooth comb and information leaflet. It will be packed in cases of six and a display unit is available with initial orders.



The launch of Step 2 will be supported with a pharmacy assistants' competition, with the chance to win one of 12 Olympus cameras and 50 runners up prizes of £10 Marks & Spencer vouchers. To enter, assistants have to answer questions on Step 2 contained in the

competition leaflet.

Further support for the product includes a consumer advice leaflet, and window stickers. School nurses will receive an invitation to one of the regional symposia held throughout the country to introduce the product. **Dendron Ltd. Tel: 0923 229251.**

Femfresh add feminine wash

"Confidence through freshness" is on offer to Femfresh Feminine Wash's prime target group of 35-45 year-old C1,C2 users, and is launched on April 1 as part of a range merchandiser (£27.44 trade).

Feminine Wash is a soap-free clear non-viscous liquid that can be applied directly onto delicate skin surfaces as a £1 coin size blob, together with warm water, before rinsing thoroughly. The 150ml pack (£2.59) comes in the Femfresh pink, floral livery, is flashed "new", and comes in a satinised, oval plastic bottle with flip-top lid.

The launch shelf merchandiser contains ten deodorants, six 12-packs of tissues, and four free packs of wash giving a profit on return of up to 48 per cent against the standard 25 per cent POR and Crookes claimed pharmacy norm of 36 per cent. The wash also comes in cases of six.

Product manger Sarah Giles says Femfresh

currently takes 56 per cent of the feminine freshness market, with pharmacy on 85 per cent of that the company estimates. She says current feminine deodorant users are likely to add the wash to their wardrobe.

"As brand leader we are committed to growing the intimate feminine freshness market on a responsible education platform," Miss Giles says.

Support will be through a continuation of Crookes £250,000 per annum PR and sampling support, with Britannia Airways passengers, night clubbers, and hovercraft passengers as the main recipients.

Sarah Giles say Crookes position Feminine Wash as the ideal cleanser for women away from home, but says the product should not be used by women who have thrush or cystitis.

The active ingredient of the Femfresh range is chlorhexidine. **Crookes Healthcare Ltd. Tel: 0602 507431.**

Sleep easy

Safe T Sleep is a device from New Zealand to prevent babies from rolling onto their stomach during sleep.

It is a band of soft, double thickness cotton which fits across a mattress and is secured with Velcro. To this is attached a soft panel which is wrapped across the baby's stomach.

Safe T Sleep comes in three sizes to fit a pram, cot or single bed and retails from £7.99 to £11.99. **Playgro UK. Tel: 0372 469979.**

Maws support

The Maws range is being supported by a £200,000 advertising campaign, targeting the new additions to the Suncare range, together with the Travel Happy Cup and the Resolve Teat.

Advertisements are to be featured in the parenting Press. **Addis Ltd. Tel: 0992 584221.**

Borghese skincare and cosmetics in UK

The Princess Marcella Borghese range of Spa skincare and cosmetics is being extended to the UK market.

Based on extracts from the Tuscan Terme di Monetecatini spa, the skincare collection comprises a full range of products to purify, activate, and restore skin. Also available is a range of eye care, body care plus

hair and scalp care products. Prices range from £11.50 to £40 across the range.

The Spa colour range is also enriched with mineral extracts from the famous spa.

The range includes foundations, powders, blushers, eye make-up, lipstick and nail polish. **Halston Borghese UK Ltd. Tel: 071-629 1699.**



Sanatogen have added evening primrose oil 500mg to their range of EPO products. Available in packs of 50 capsules, the product will retail at £5.99. It will be supported by advertising and PR activity. **Fisons Consumer Health. Tel: 0509 611001**

WHICH DILTIAZEM GIVES effective control in Angina with a significant cost advantage?⁽¹⁾

Dilzem S.R.

WHICH DILTIAZEM IS THE only Diltiazem available in a true 60, 90 and 120mg b.d. dosage regimen?

Dilzem S.R.

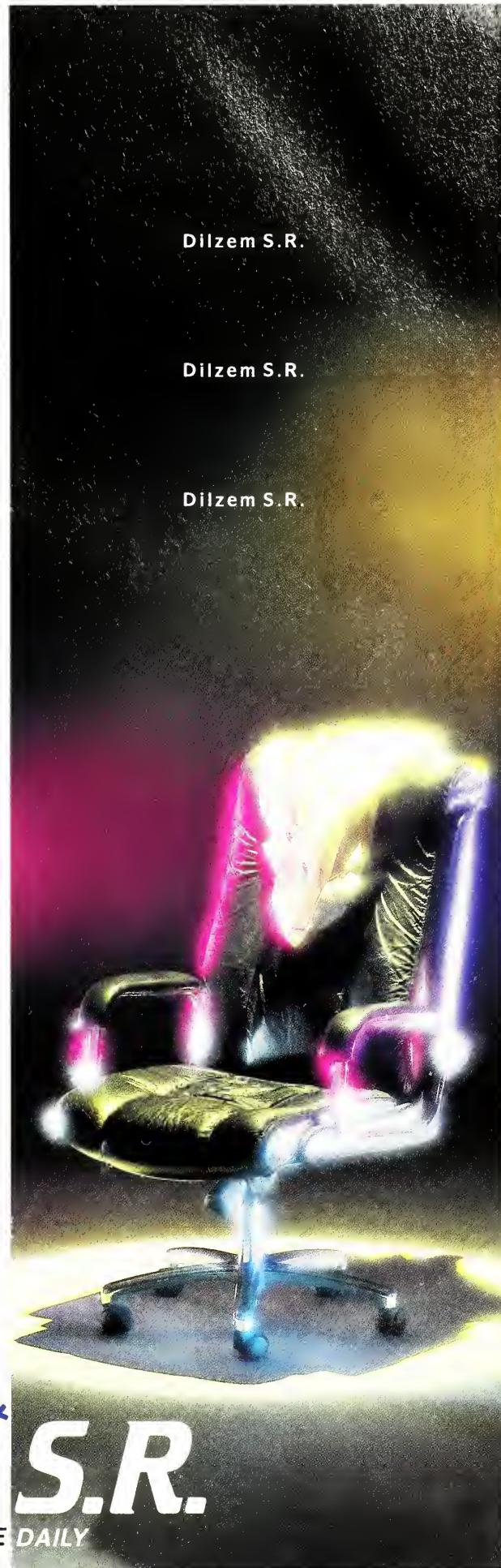
WHICH DILTIAZEM IS AN effective treatment for Angina and has a lower incidence of side effects than Nifedipine?⁽²⁾

Dilzem S.R.

IT IS MADE BY ELAN PHARMA, the accepted innovators in drug delivery systems, and has just been launched in the U.K. What is it?

THE ANSWER IS

DILZEM[®] S.R.
DILTIAZEM TWICE DAILY



PRESCRIBING INFORMATION: **Presentation** Dilzem[®] SR is available as Dilzem SR 60, Dilzem SR 90, Dilzem SR 120 capsules containing 60 mg, 90 mg or 120 mg diltiazem hydrochloride as sustained release beads. This sustained release formulation is designed for twice daily administration. **Indications** All strengths are for the treatment of angina pectoris, including Prinzmetal's angina, and in the treatment of mild to moderate hypertension. **Dosage** Adults: The usual initial dose is 90 mg twice daily. Dose may be increased to 180 mg twice daily if required. **Elderly** Initiate at the lower level of 60 mg twice daily and increase slowly to give the required level of control. Do not increase the dose if the heart rate falls below 50 beats per minute. **Children** Not recommended. **Contra-indications** Pregnancy, lactation and women of child bearing potential. Patients with bradycardia (less than 50 beats per minute), second or third degree heart block or sick sinus syndrome. Patients with impaired renal or hepatic function. Left ventricular failure with stasis. Concomitant administration of dantrolene infusion. **Precautions and Warnings** Caution in patients with hepatic dysfunction, mild bradycardia, first degree atrio-ventricular block or prolonged PR interval, and in patients receiving concurrent anti-hypertensive treatment or other hypotensive agents with moderate protein binding. Rare instances of hyperglycaemia have been reported in association with diltiazem hydrochloride. The use of diltiazem hydrochloride in diabetic patients may require adjustment of their control. (Refer to datasheet for full instructions) Diltiazem may increase the blood levels of concomitant carbamazepine, theophylline, cyclosporin and digoxin. Concomitant H₂ antagonist therapy may increase diltiazem blood levels. Do not suck or chew capsules. **Adverse effects** Diltiazem is generally well tolerated. Side effects include anorexia, nausea, bradycardia, rash, flushing, ankle oedema, malaise, headache, gastrointestinal disturbance, sinusatrial and atrio-ventricular block, elevation of liver transaminases. **Legal category** POM. **Basic NHS price** Dilzem SR 60, Blister pack (100 caps) £15.50, Dilzem SR 90, Blister pack (60 caps) £10.94, Dilzem SR 120, Blister pack (60 caps) £12.15. **Product licence nos** Dilzem SR 60 - PL 0018/0205 Dilzem SR 90 - PL 0018/0206, Dilzem SR 120 - PL 0018/0207 Prepared Feb '93.

REFERENCE [1] MIMS Jan '93 Drug Tariff Feb '93 [2] Frishman Circulation 77 No. 4 774-786 1988

*Trademark (WL)

Elan Pharma Limited, Lambert Court, Chestnut Avenue, Eastleigh, Hampshire SO5 3 ZQ

élan PHARMA

PUTTING IDEAS INTO PRACTICE

Deep Fresh splash out with relaunch

Reckitt & Colman are relaunching their Deep Fresh range of bath foams and shower gels, backed up by a £1 million television commercial in May and June.

The brand, which currently has 45 per cent of the market, is being repackaged and will feature a new variant, Sea Spray.

The Deep Fresh range will remain in the family sector of the market with its everyday for everyone positioning, but the new pack graphics, colours and descriptors are intended to provide a differentiating proposition for the consumer. "The range had started to look generic, with its hard, very functional graphics," said a Reckitt & Colman spokesman.

In its new guise, the range is expected to benefit from a more contemporary and cosmetic imagery without compromising the brands



functional integrity.

The company is aware it must differentiate the product from Radox, and has developed a revitalising, water theme. "The proposition is gentle, deep cleansing," say R&C.

There are three variants which will feature in both

the bath foam and shower gel ranges: Lagoon, Waterfall, and the new Sea Spray, a pearlised formulation. The bath foam variants come in 400ml packs (£1.39) and the shower gel in a 200ml size (£1.29). **Reckitt & Colman. Tel: 0482 26151.**

Dynamique addition for Impulse

Dynamique is the latest variant in the Impulse range of body sprays.

A fresh, fruity floral, it has been created for "the dynamic woman who possesses a strong and determined personality," say Elida Gibbs.

Dynamique is the second pan-European variant. The first, launched last year, was Free Spirit which has been the most successful in the brand's history and accounts for 30 per cent of Impulse sales.

The new variant will receive £3.3 million support. A television campaign starts on May 17 and there will be a further burst in late Summer. Advertising in the women's Press runs during May and June, while a national cinema campaign runs through the Summer.

Further activity includes a Summer "clam" pack (two products in a plastic shell) and Christmas packs. A trial size (£0.59) is available for the launch.

Elida Gibbs say the body spray market is static in volume terms, but growing steadily in value. Impulse accounts for half the £34.5m market. The On Fire variant will be withdrawn. **Elida Gibbs. Tel: 071-486 1200.**



Chiffon Sorbet

Chiffon Sorbet is the latest fragrance from the house of Escada.

A fruity floral, it contains notes of blackcurrant, plum, mango, apple and raspberry. Heart notes include jasmine, violet, rose, fig and prune. Base notes include amber.

vanilla, sandalwood and cedar.

The bottle is the shape of an elongated heart in frosted blue glass.

Available in two sizes of eau de toilette, it will retail at £19.50 (30ml) and £24.95 (50ml). **Kenneth Green Associates. Tel: 0372 469222.**

On TV Next Week

GTV Grampian	C4 Channel 4	STV Scotland (central)
B Border	U Ulster	Y Yorkshire
BSkyB British Sky	G Granada	HTV Wales & West
Broadcasting	A Anglia	M Meridian
C Central	CAR Carlton	TT Tyne Tees
CTV Channel Islands	GMTV Breakfast	W Westcountry
LWT London Weekend	Television	

Aquafresh toothpaste:	All areas
Benylin:	All areas except G, C4
Belle Color:	All areas except U, GMTV
Colgate toothpaste:	All areas
Cream Silk:	All areas
Endekay gum:	G, C, A, M, LWT, C4
Gillette Series:	All areas except STV, GMTV
Hofels garlic pearls:	G, TT, Y
Listerine:	All areas except LWT
Nicorette Patch and Gum:	All areas
Once Multi-Style:	C4, BskyB
Peaudouce:	C4, GMTV
Ponds Performance:	All areas
Plax:	All areas
Rapeze:	STV, B, C, C4
Slim Fast:	All areas
Synergie Bio-Contour eye gel:	All areas except U
Timotei:	All areas
Ultra Togs:	C4, GMTV
Widsom Reflex:	GMTV, C4
Wrigley's Extra & Orbit:	All areas

Fun new image for Matey

Matey is 30 years old, and to celebrate the brand is being relaunched with a new bottle, new characters and a larger size.

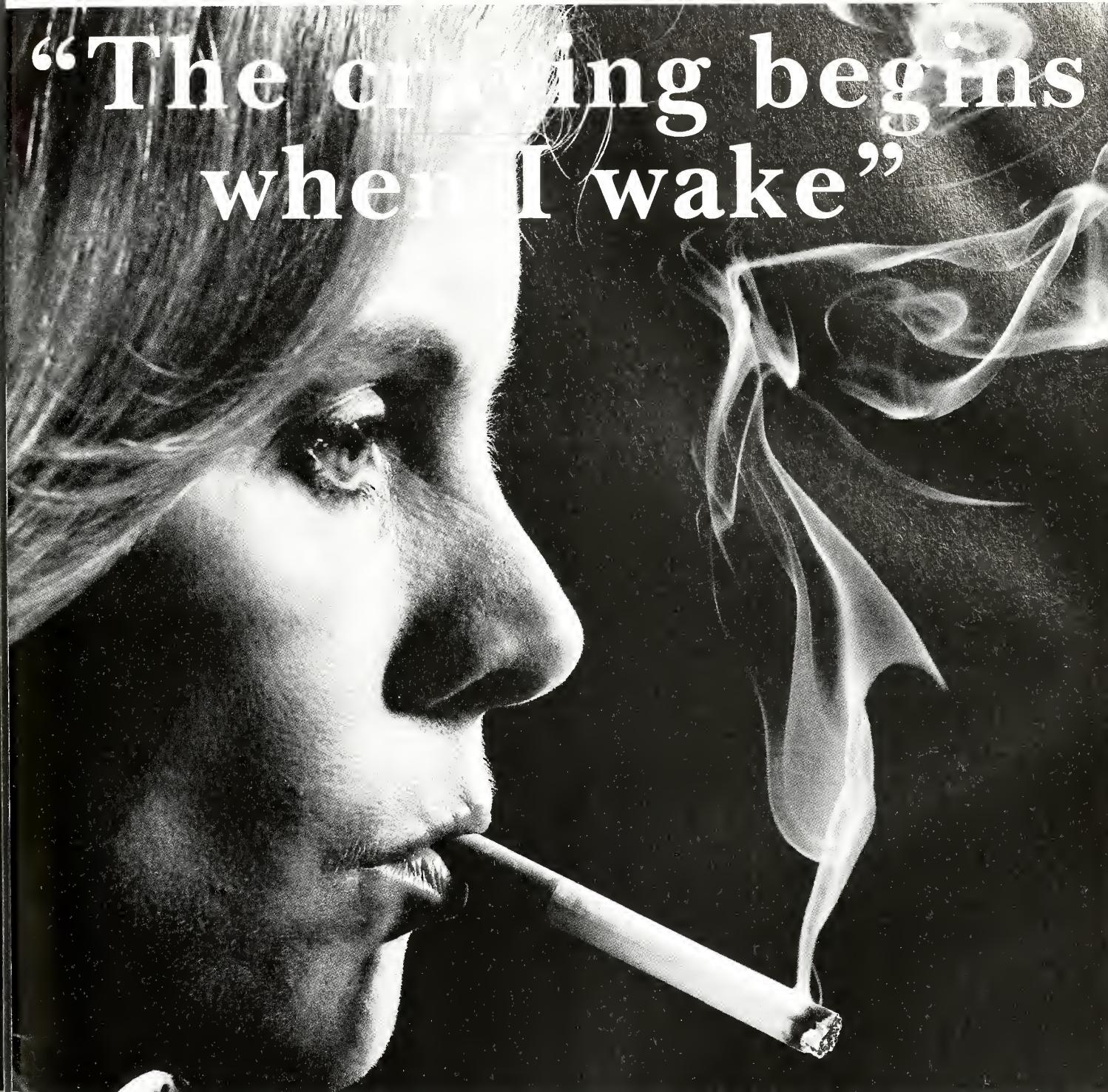
The new look Matey bottles are three dimensional and comprise four characters: Sailor, Mermaid, Ollie Octopus (with colour change

formulation) and Pirate. It is anticipated that further characters will be introduced at a later stage, says the company.

The bottles hold 500ml (£1.49) of bath foam, the formulation of which remains unchanged. **Sara Lee Household & Personal Care. Tel: 0753 523971.**



"The craving begins when I wake"



**Worn both day and night the Nicotinell patch provides sufficient blood nicotine levels to help prevent cigarette craving
...especially first thing in the morning**

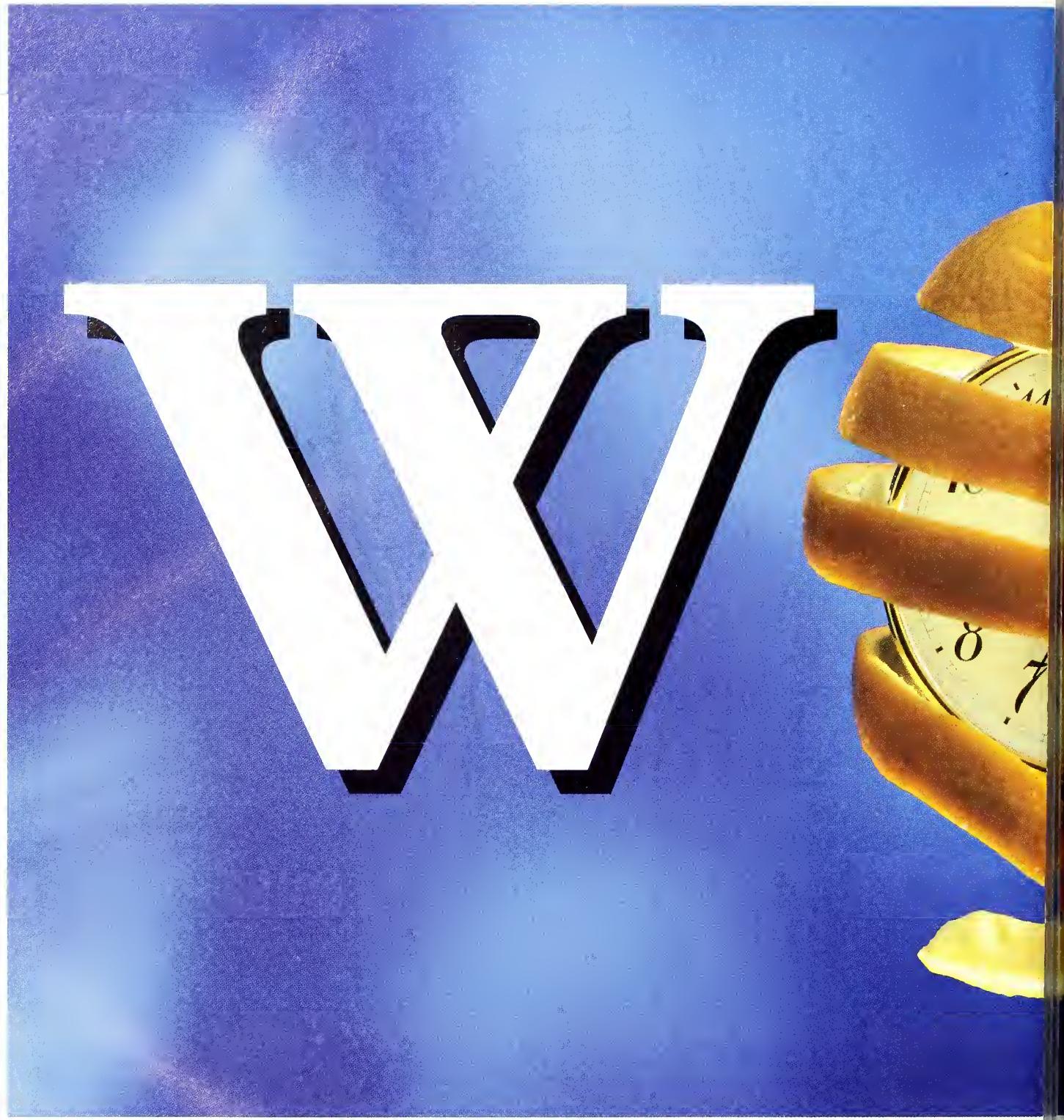
Nicotinell® TTS Prescribing Information Presentation

Transdermal therapeutic system containing nicotine, available in 3 sizes (30, 20 and 10cm²) releasing 21mg, 14mg and 7mg of nicotine respectively over 24 hours. **Indication** Treatment of nicotine dependence, as an aid to smoking cessation. **Dosage** Stop smoking completely when starting treatment. For those smoking more than 20 cigarettes a day, treatment should be started with Nicotinell TTS 30 once daily. Those smoking less should start with Nicotinell TTS 20 once daily. Sizes of 30, 20 and 10cm² permit gradual withdrawal of nicotine replacement, using treatment periods of 3-4 weeks with each size. Doses above 30 cm² have not been evaluated. The treatment is designed to be used continuously for 3 months but not beyond. However, if still smoking at the end of the 3 month treatment period, further treatment may be recommended following a re-evaluation of the patient's motivation. **Contra-indications** Non-smokers, occasional smokers, children under 18 years. As with smoking, Nicotinell is contraindicated during pregnancy and breast feeding, and in acute myocardial infarction, unstable angina pectoris, severe

cardiac arrhythmias, recent cerebrovascular accident, skin disease preventing patch application and known hypersensitivity to nicotine. **Precautions** Hypertension, stable angina pectoris, cerebrovascular disease, occlusive peripheral arterial disease, heart failure, hyperthyroidism, diabetes mellitus, renal or hepatic impairment, peptic ulcer. Persistent skin reaction to the patch. Keep out of the reach of children at all times. **Side-effects** Smoking cessation causes many withdrawal symptoms. Most common adverse effects directly related to nicotine patches are reaction at application site (usually erythema or pruritus) and sleep disturbance. See data sheet for details. **Legal category** P. **Packs** Nicotinell TTS 10 (PL0001/0173) in packs of 7 patches, trade price £8.21, 28 patches, £32.83. Nicotinell TTS 20 (PL0001/0174) in packs of 7 patches £8.64, 28 patches, £34.56. Nicotinell TTS 30 (PL0001/0175) in packs of 7 patches £9.07, 28 patches, £36.28. ® denotes registered trademark. Full prescribing information is available on request from Geigy Pharmaceuticals, Wimblehurst Road, Horsham, West Sussex, RH12 4AB. Telephone (0403) 272827. **Date of preparation** December 1992.

NEW
Nicotinell®
TTS
transdermal nicotine
**helps to overcome
nicotine addiction**

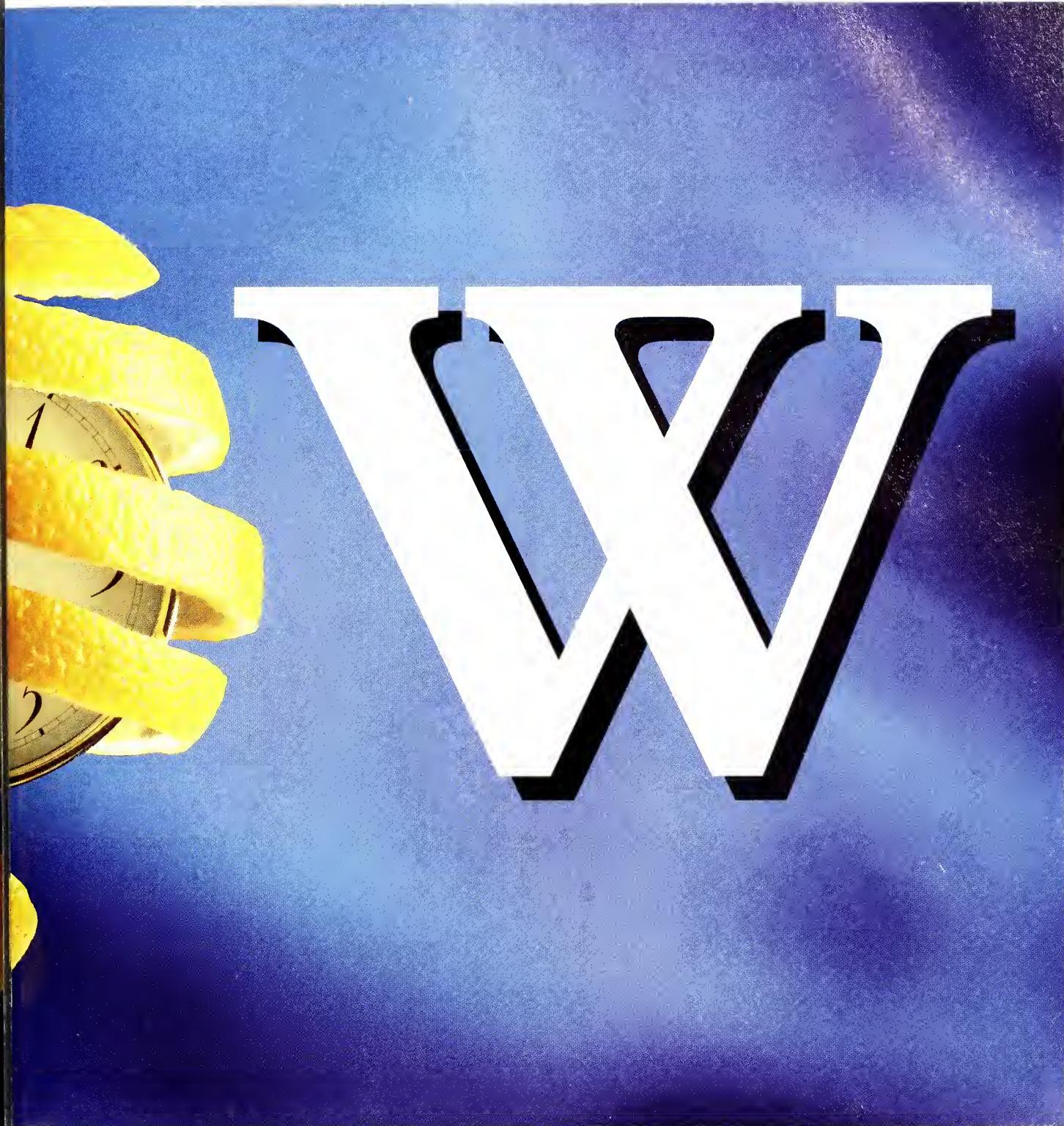




Fybogel Orange as never experienced

We have to admit it, when we got the taste-test results we were amazed. We had expected there to be some improvement, but not quite this much.

The taste-tests revealed that new formulation Fybogel Orange was not only the best-liked flavoured fibre product for fruitiness, aftertaste and drinkability, but also the best-liked flavoured fibre product overall.¹



iced before

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NEW Fybogel Orange

Ispaghula Husk BP

Regular as clockwork



Reckitt & Colman Products Limited

colonic atony. Each sachet contains 3.5g Ispaghula husk BP. **RSP Price:** 10 Sachets £1.25, Eire 79p. **PL NO.:** Fybogel 0044/0041, **Irish PA** 27/2/1, Fybogel Orange 0/0068, Irish PA 27/2/2. Reckitt & Colman Products Ltd, Hull, HU8 7DS, from whom further information is available. Fybogel, Fybogel Orange, and the sword and shield are trademarks of Reckitt & Colman Products Ltd. **Reference:** 1. Market Research Report, R&C Report No. 9293; Data on file, 1992.

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New feeding aids

Mam's feeding equipment range has been extended with four cutlery sets.

The baby weaning set (£3.45) comprises a bowl and feeding spoon for use with babies from 16 weeks. The bowl has two compartments and a thumb rest for easier grip. It comes in two colours.

A Starters spoon and fork set for toddlers aged one to three years (£3.45) is available in two shades. The Training knife and

fork set is for children aged from three upwards (£3.45). A stainless steel and plastic training spoon (£2.05) is available for children over three.

Mam have also introduced a spill-proof drinking cup (£2.95). It features a twist and seal top and the spout will only release liquid when sucked. There is a choice of three colours, decorated with motifs. **Mam Ltd.** Tel: 021-459 4304.



Spring beauty offer

For Spring Givenchy are offering three Swisscare body products in a presentation pouch for £40. The offer runs from May 3 until May 29.

Products included are Perfect Exfoliating body care, Firming Gel body care and Moisture Bath body care. **Givenchy.** Tel: 0932 245111.

Discreet service

Unichem have introduced an incontinence leaflet with a tear-off order form for incontinence products.

The leaflet contains an introduction to the types and causes of incontinence plus self-help tips. It comes in packs of 75 in a counter top dispenser, available to pharmacists who order five or more packs of Unichem incontinence products.

The offer runs during April and includes a 10 per cent discount off trade price. **Unichem.** Tel: 081-391 2323.

Dairy-free spread

Granovita have extended their range of specialist foods with the addition of a lactose-free non-hydrogenated low fat spread, enriched with calcium and vitamin B12.

Free from animal fats, it is suitable for vegetarians and vegans. It retails at £1.07 (500g tub). It has a six month shelf-life and comes in cases of 12 (£9.63). **Granovita Ltd.** Tel: 0933 272440.



New look for Savlon Dry Skin

The Savlon Dry Skin range has been relaunched with new packaging and consumer offers.

The two cream packs will feature cash-back offers of 50p on the 50g tube and £1 on the 125g tub. The 150ml bath oil will feature a free hand

loofah banded to the pack. The brand will be supported by a Press campaign in women's magazines.

Pharmacists will receive a £10 cheque from Zyma for all orders of three cases or more. **Zyma Healthcare.** Tel: 0306 742800.

Pampers get Trainers

To ease the transition from nappies to pants, Procter & Gamble are introducing Pampers Trainers.

On test market in Northern Ireland and Holland, Trainers look and feel like pants, but are

absorbent like a nappy. For children aged 18-36 months, Trainers have a stretch waistband and side panels and are easily removed. **Procter & Gamble.** Tel: 091-279 2000.

'Insult' offer prompts call for Society to act

After the publication last week of the offered remuneration package, I wonder how low the profession has sunk in the Government's eyes, to be made such an insulting offer. This must be a result of an absence of direction from the Royal Pharmaceutical Society and an awareness of the lack of unity between the various Pharmaceutical Services Negotiating Committee factions.

"But remuneration is not our responsibility — there is nothing in the Code of Ethics which is being contravened!" I believe this will be the cry from Lambeth. But then neither was there any breach of our sacred Code over the pilferage of nursing homes by multiples, or the attempt to take over collection and delivery services from surgeries, to mention but two issues of the recent past.

No, of course there was no breach of the Code of Ethics. Do they not realise that large companies have specialist personnel looking for loopholes in regulations which can be legitimately used? When will the RPSGB cease to be led and

become a leader. If it is unable to make the above problems its business, then heaven help us.

Then to the problems of PSNC. In all fairness we must realise that rationalisation must come. However, we also have to accept that negotiation does not really take place. We may posture and attempt to make political points, but as far as I can see the DoH talks and we have to listen. Oh, to be regarded as highly as doctors! They shout and the DoH runs.

I firmly believe that a way has to be found to present a truly united front — multiple and independent. If not, then what will the next threshold be to give the required pharmacy reduction — 2,100, 2,500? Government budgets will be met come what may.

Surely the problem of payment must in some way be a starting point to finding the way to unanimity. We must appear to be united: the alternative is the road to the demise of pharmacy as we know it. After the news of the offcr businesses dispensing less than 1,000 items have become unsaleable. How many pensions have been decimated as a result?

I fear that this total absence of any form of leadership by

RPSGB in most matters outside of academia, coupled with our traditional battle of multiple v independent, is playing straight into the Government's hands. Some may be gravely concerned that the pharmacy degree needs lengthening or its content revising, but failure to provide secure employment will soon make pharmacy about as useful a degree as Serbo-Croat!

Can we not create a united leadership for our profession? One committed to the future of retail pharmacy. Then at least those discussing our remuneration will be in a position to truly negotiate. How are we to achieve this? Can the National Pharmaceutical Association become involved? As a third party maybe it can create a common, uniting ground.

The newly created leadership could prove well-balanced. On the one side a negotiating team with strength, on the other, a respected body of thinkers, while in the middle, an active and practical organisation which could create a sense of respect in professional circles.

A dream? I hope not.

G Batten
Liverpool

Contract — with or without clout?

Regarding the "no industrial clout" referred to in your editorial (C&D March 20, p483) what would be the effect of an imposition from April 1 of a unilateral declaration from contractors that seven days maximum supply would be dispensed against all FP10's, without exception, until an acceptable contract settlement has been reached with DoH?

If this action was endorsed by PSNC, then said body (National Prescription Research Centre included) could inform the Prescription Pricing Authority of "its" (ie. "our") policy in one single, and very large script endorsement namely "please pay seven days supply only until further notice."

The word "contract" implies freedom of choice in an arrangement freely entered by both parties. The exercise of this freedom is open to everyone, regardless of "clout".

"Take it or leave it" from either side of a contract just will not do.

Anthony Boyle
Liverpool

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Time PSNC was made accountable to all

The Pharmaceutical Services Negotiating Committee is becoming an organisation that has no courage or self-confidence. I believe it is time that the Committee is made more directly accountable to all contractors.

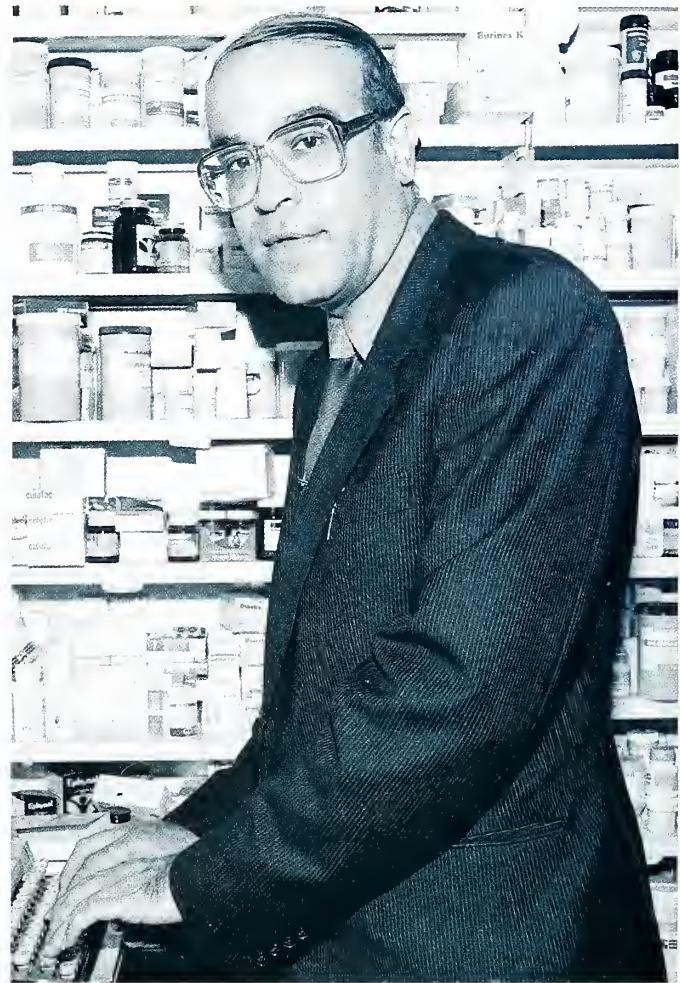
What we need in pharmacy is truly strong and demonstrable leadership which can take us into a prosperous and more professionally fulfilling future. However, such leadership has to come not only from the PSNC, but also from the Royal Pharmaceutical Society and the National Pharmaceutical Association.

According to PSNC's constitution, the primary function of the Committee is to secure pharmacy contractors proper remuneration and contract terms for the services they provide to the NHS.

Furthermore, the Committee has to respect, protect and serve the interests of all NHS pharmacy contractors in England and Wales regardless of the number of items they dispense each month.

PSNC for all?

But does PSNC really represent and protect all pharmacy contractors? The message coming from the Committee is that they are no longer able to do that. Chairman David Sharpe is on record as saying that to be eligible for the professional allowance due to be introduced in April, contractors must dispense 1,000 items a month



Proprietor community pharmacist and former Council member Ashwin Tanna reflects on the Government's attempt to revise the way in which pharmacy contractors in England and Wales are remunerated for NHS work; also, he suggests how the professional bodies should respond. In particular he is critical of the role of the Pharmaceutical Services Negotiating Committee, but also looks at the National Pharmaceutical Association's stance and that of the Royal Pharmaceutical Society. This article was written before the Department of Health made their pay offer for 1993-94 last week

or be 1km from the nearest pharmacy. Again, at a recent Local Pharmaceutical Committee Conference on February 22, Mr Sharpe said PSNC was adamant that the minimum number of prescriptions that would have to be dispensed in order to gain a professional allowance should not rise above 1,000 items per month.

Why did the Committee members on PSNC fix on the practice allowance entry point of 1,000 items a month? What

could PSNC do if the Department was to suggest that before the professional allowance is given, at least 1,500, or even 2,000 scripts should be dispensed each month?

The Department knows that PSNC has no clout, and cannot take it on as effectively as it would like. Since PSNC's judicial review application was dismissed last year PSNC and contractors have had no real recourse to the Pharmacy Review Panel; apparently

because PSNC failed to lodge an appeal when the DoH threw out the cost-plus contract in 1991.

Why has PSNC tacitly accepted a threshold of 1,000? If anything over 1,000 is not acceptable, then any number should not be acceptable. If that is not selling contractors down the river then I do not know what is!

PSNC's audacity?

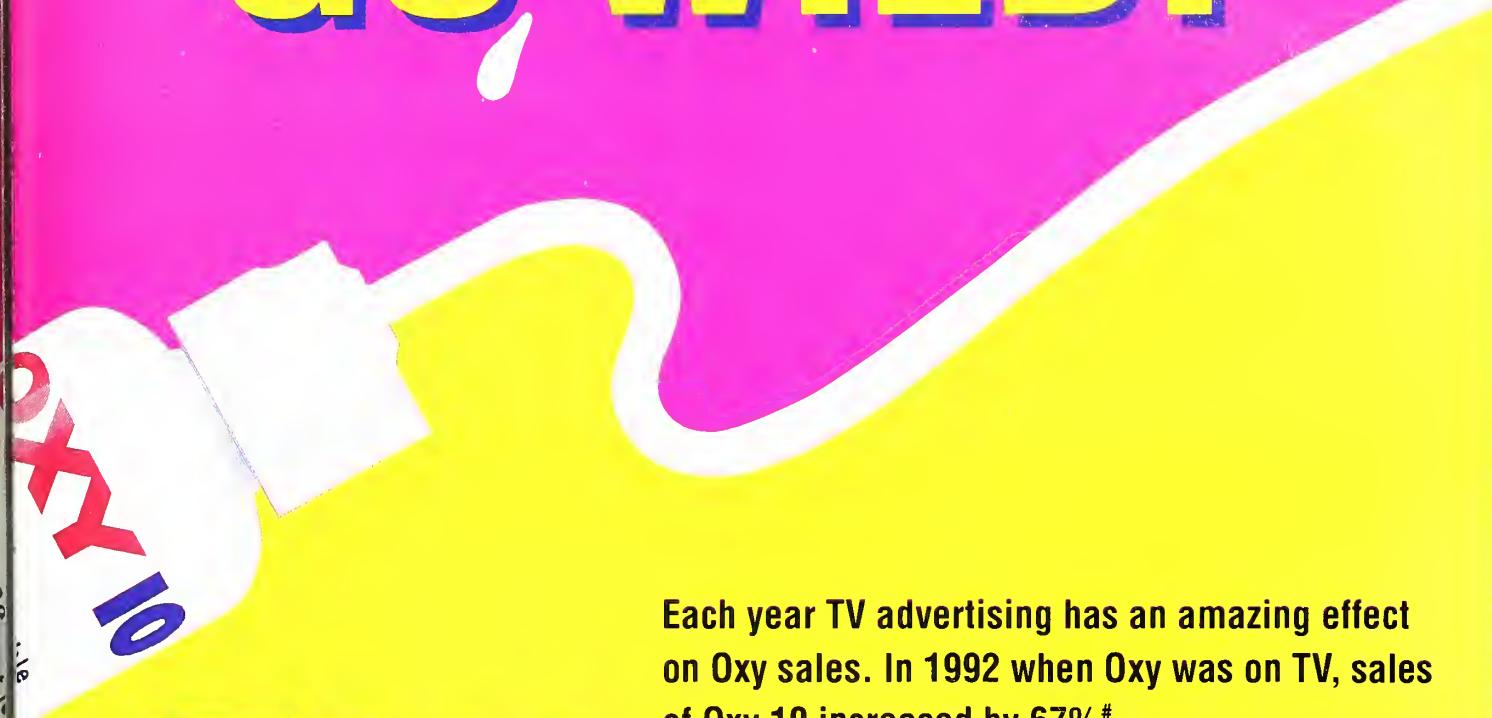
In fact PSNC has the audacity to take the leviés from all contractors regardless of the number of items they dispense — and now they are lining those contractors up for bankruptcy "like lambs to the slaughter", without mentioning any form of compensation.

It is indefensible, inconceivable, and despicable of PSNC to "agree" with the Department a threshold level for the payment of the practice allowance to contractors.

The practice allowance must be paid to contractors on a *pro*

Continued on p558

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Lines open Monday to Friday, 9am to 5pm from 17th March to 30th April 1993. *Oxy is a trademark *Nielsen

Continued from p556
rata basis since their role is not just the dispensing of prescriptions. We are able to offer: advice, counselling on common ailments, health education, health promotion, diagnostic testing services, and a wide range of over-the-counter medicines.

No cost

All these services are provided at no cost to the Exchequer and without an appointment system.

Even Health secretary Virginia Bottomley — at the PSNC annual dinner — acknowledged that community pharmacy would continue to be an exciting profession to work in, because to achieve the aims stated in the "Health of the Nation" White Paper, the Government would continue to need the vital contribution, commitment and expertise of community pharmacists.

A earlier helpful payment to small contractors was the setting up, in 1980, of the Basic Practice Allowance; new pharmacies opening within 1km of an existing pharmacy were not eligible for this allowance, which was intended to discriminate between contractors in respect of location.

Nuffield loading...

Even the Nuffield Report did not agree that, as a consequence of abolishing the BPA, NHS remunerations should

be loaded even more heavily in respect of number of prescriptions dispensed. Such a thing would have been, and still is, a totally retrograde step.

Nuffield further stated that NHS remuneration should "reflect the objectives of the negotiators".

Those objectives should be to promote a shift in the way in which pharmacists use their own time, and to support them in the exercise of their professional role.

Such objectives are not served by a system which requires that the whole of a pharmacy's fee is to be paid by reference to the prescription dispensed.

Constitutional

Turning to the written constitution of PSNC; it is totally undemocratic, since amendments to it cannot be made unless they are ratified by a two thirds majority of those present at a properly convened meeting of the Committee.

However, only local pharmaceutical committee representatives can attend such a meeting.

No "ordinary contractors" from England and Wales can attend, and so they do not have a vote on any issue. Their only recourse is to make sure they elect the right LPC representative in the first place, and lobby him or her accordingly.

Furthermore, only an LPC can call a special conference,

provided a total of not less than 25 LPCs put their name to the request.

Members of both the RPSGB and the NPA can call special or extraordinary general meetings, although again, they have to get the requisite support from their peers.

Because the PSNC constitution does not allow contractors to call special meetings directly, it is far more difficult for any contractor, small or otherwise, to instigate any constitutional change.

Time of unrest

In this time of unrest over the impending new financial pressures that small contractors can expect following the changes in the structure of NHS pharmacy contractors pay, and the punitive cash constraints widely anticipated by PSNC, should not contractors also expect support and loyalty from the RPSGB and the NPA?

According to the Society's Charter, one of its objectives is: "... to maintain the honour and safeguard and promote the interest in their exercise of the profession of pharmacy."

Also the NPA's Memorandum of Articles states that the principal object of the Association shall be: "To act generally as an organisation representative of retail pharmacists in all matters connected with the retail pharmacy, and in particular to do so in matters concerning any enactment or other legislation

which in any way regulates or relates to NHS or National Insurance, or otherwise affects retail pharmacists, and in its capacity as such an organisation as aforesaid, to conduct negotiations and enter into agreement with, and to advise and liaise with any council, board, department, committee, association or other body, organisation or person."

Furthermore, one of the NPA's principal objects is that it shall follow ancillary objects and powers, that is to say to institute, promote, support, oppose, consider and criticise legislative, administrative and other measures or proceedings affecting or likely to affect retail pharmacists.

NPA/RPSGB aid

The Society and the NPA should come out very strongly in support of protecting all the contractors, regardless of the number of prescriptions they dispense.

If financial attrition is applied then the Department will only leave the larger pharmacies or multiples to survive and deprive the community of their local pharmacies.

To sum up: all three professional bodies must get their acts together and convince the Minister to make another U-turn in policy! After all, the present Government has made a lot of U-turns so far. Why should we allow it to move the pharmacy pay goal posts now?

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When can broken bulk be claimed on individual ingredients in an extemporaneously prepared medicine — or can it be claimed at all? The Pharmaceutical Services Negotiating Committee unravels yet another Drug Tariff conundrum

Q

- The mixture is included in Drug Tariff Part VIII Category E. Can the pharmacist claim broken Bulk on an individual ingredient?
- 2 x 150ml has been ordered. How many container allowances will be paid?
- How many fees will be paid for this prescription?

A

The pharmacist may claim broken Bulk (and Out of Pocket expenses if required) on an ingredient included in a

Age if under 12 years yrs mths	Initials and one full forename		
Address			
Pharmacy Stamp			
Pharmacist's pack and quantity	No. of days treatment N.B. Ensure dose is stated	NP	Pricing Office use only
<p>Rx</p> <p>Mist Ammon Chlor BP</p> <p>Mitte 2x150ml</p> <p>Ammon Chlor 30g</p> <p>Aromatic ammonia soln 15ml</p> <p>Claim 58</p> <p>Liquorice extract 30ml</p> <p>Purified H2O to 200ml</p>			
Signature of Doctor		Date	
Form			

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Our new tray certainly provides a cost-effective entry point for the pharmacy into the fast-growing - and profitable - herbal medicines market. And once your customers have tried our gentle, effective herbal medicines, we are confident they will return to buy the full-sized packs that are already established favourites.

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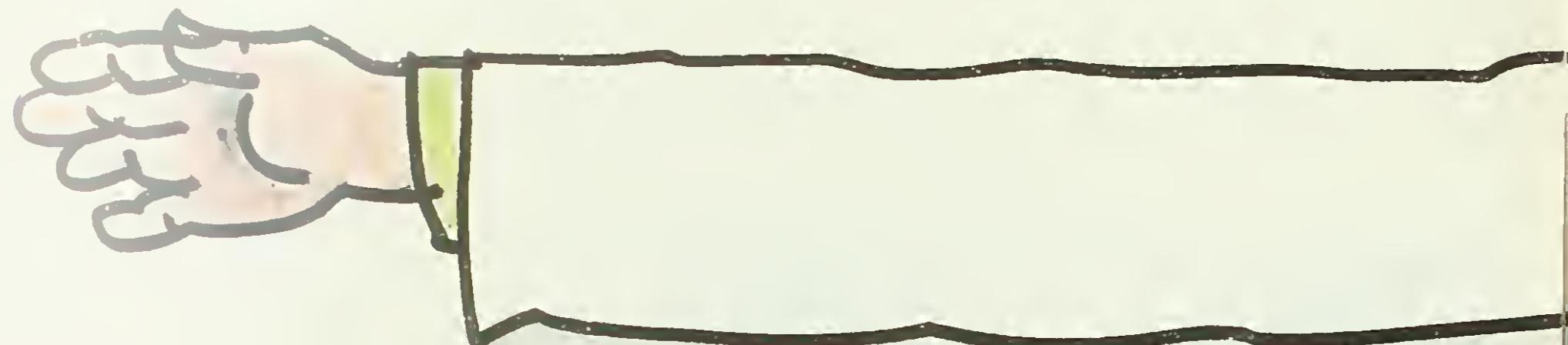
UniChem. The big to help your b

In today's economic climate, competition for business has never been keener, or come from so many different sources - with High Street multiples and out-of-town shopping centres all vying for your valuable customers.

Let's face it, you need all the help you can get. And no-one gives you more than UniChem.

Which is why so many independent pharmacies have already welcomed our unique range of services with open arms.

Just say the word, and it's all yours.



THE PARTNERSHIP PROGRAMME: BIGGER AND BETTER THAN EVER FOR 1993.

The UniChem Partnership Programme was created with just one simple aim: to bring you more business.

It's proved such a phenomenal success, we've expanded and extended it for 1993.

There's a brand new section on Professional Services, including low-cost personalised leaflets for local door-to-door distribution (which we can also arrange for you). And attention-grabbing in-store p.o.s. detailing the services you offer.

To extend your links with the local community, there's our new Nursing Home Service, to help you secure repeat prescriptions.

We've also increased the range and frequency of our national consumer promotions.

And we've launched two terrific titles:



"Partnership News," a regular newsletter to keep you in touch with the very latest services and promotions.

And "Healthy Times," a free colour consumer magazine that guarantees all your customers a good, lively read (plus plenty of competitions and coupons to bring them back through your door).

THEN THERE ARE THE SPECIAL PRIVILEGES OF BEING A GOLDPARTNER.

We've led the field for many years. But we've never offered you anything as exciting and important as this.

It's called Goldpartners. And already 1500 independent pharmacies have joined this new

and exclusive club.

It's our way of giving more of a helping hand to those intent on aiming higher, and targeting even greater profits.

Join them, and you'll enjoy, amongst other benefits:

- O.T.C. offers at preferential discounts.
- National consumer promotions and door-to-door leaflet distribution.
- Seasonal themed promotions with full p.o.s. support.
- Monthly Own Brand multi-buy promotions.
- Tailormade Professional Services leaflet.
- Hotline telephone number featured in all consumer press advertising.



Go for it. Go for Gold!

biggest package of all, business grow.

OUR NEW CONTACT LENS CARE RANGE WILL SEE YOU EVEN BUSIER.

We're totally committed to the expansion of our own brand range of products.

Hardly surprising, then, that we've cast our eyes on a rapidly growing market.

Within the next 2 years, around 3 million people

will be wearing contact lenses. That makes them very valuable customers indeed, because they all need a regular supply of solutions.

UniChem's own brand Contact Lens Care Range offers a whole month's supply at a price fully 20% lower than any other major brand. And an introductory R.S.P. of just £9.99 that's equally eye-catching.

Get the new range on to your shelves. And see how quickly new profits pull sharply into focus.



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AND WE CAN HELP YOU MAKE IT BIG IN PICTURES.

What's the biggest name in the world of film? Correct – it's Kodak.

It's the name that has already acted as a prompt for well over 1400 independent pharmacies to snap up the new UniChem/Kodak



developing and processing service.

And the one name guaranteed to bring the customers in, for an unrivalled quality service.

But we're not just offering you famous name processing. It's fast, too – just 24 hours. And at extremely competitive prices.

Within 7 days of receiving your application, we'll provide and install all the eye-catching window displays, posters and point-of-sale you'll need to get you up and running.

Then it's 'Action'. And a nice big smile for the camera.

If you're looking to open up your business, contact UniChem now.

And watch your business grow.



1993

HELPING YOU BUILD YOUR BUSINESS THROUGHOUT THE YEAR.

UniChem PLC, UniChem House, Cox Lane, Chessington, Surrey KT9 1SN. Tel: 081-391 2323.

News from Germany

Prescribing chaos sees pharmacy turnover plummet 25pc or more

At the end of last year, incensed at Health Minister Seehofer's health reforms, (C&D October 17, 1992), some Stuttgart doctors put small stickers on prescriptions showing a photograph of Seehofer and quoting him: "Doctors prescribe too much", to which they had added: "From 1993 that will change".

It was never made clear whether this was a message for the pharmacist, the patient or both, but it must rank as one of the greatest understatements in the history of German health care.

The situation in the first few weeks of 1993 could truly be described as chaotic. Initial figures show a drop in pharmacy turnover of 25-65 per cent, with a 25 per cent average fall in value of a prescription.

Lack of clear guidelines, misleading and sometimes wrong information from some health insurance schemes to doctors, has led to an overreaction by many prescribers worried that if they exceeded a "drugs budget" they would be out of pocket.

There has been a massive move from original preparations and high and medium priced generics to simply the cheapest on a computer list, or outdated forms of treatment if these are cheaper.

This panic response by some doctors has posed enormous and largely unexpected stock problems for pharmacists and wholesalers faced with ever-changing demands for obscure, hitherto rarely requested generics.

Horror stories have reached the Press of patients receiving letters from their doctors saying they would be removed from the GP's list because records showed they were in the top ten most expensive to treat!

Pharmacists have noticed a sharp rise in private prescriptions. For example, an asthma patient was told his Berotec spray could no longer be prescribed as otherwise the prescriber's drugs budget would be exceeded. However a private prescription would be available.

What the GP did not realise was that this ploy is ineffective as many patients then present private scripts to their insurers for reimbursement and the cost is eventually debited to the prescriber's budget. However, doctors are soon to be issued with rubber stamps with which to mark prescriptions to stop this practice.

Bewildered patients have been confronted with sudden changes in their treatment. For example, a patient with hypertension and congestive heart failure refractory to other drugs was switched from enalapril (monthly cost in Germany about £24) back to the previously tried and ineffective atenolol, hydrochlorothiazide and amiloride, costing half as much.

Another patient requiring a repeat prescription for Zantac was told this could no longer be prescribed and was advised to buy hydroxycarbonate from his pharmacist instead.

It was also reported that patients with diseases requiring expensive drugs were needlessly referred back to specialists in the forlorn and misguided hope that they would take over the costs of treatment.

Faced with enormous public criticism, the federal and regional associations of GPs have issued a series of conflicting and confusing instructions to doctors that have

merely made matters even more uncertain.

Minister Seehofer, while claiming the huge savings provided ample evidence of previously spendthrift prescribing, has had to urge doctors not to stop essential treatment, and the health insurance schemes have warned doctors against putting patients at risk.

Dental treatment has also been affected, as some dentists have only agreed to undertake fillings on a private patient basis because the health schemes now demand a two year guarantee on those covered by their insurance.

At the centre of the dispute is the inevitably disputed amount of savings which have to be made by doctors to meet recently announced drug spending targets.



Insurance to be reviewed

Scarcely had the ink dried on the Government's latest reforms than Minister Seehofer announced a major review of the health insurance system to look at the balance between the principle of social solidarity and individual responsibility for its funding well into the next century.

A committee of four economists and four experts from the field of medicine is to report by the end of 1994. No further changes are planned before that time.

The committee is to consider the financial basis of health care funding — whether to continue on an insurance basis or whether to introduce an element of tax revenue — the range of cover to be provided and how preventative health care can be incorporated.

Seehofer has insisted that he has no secret plan and will await the findings of the report. He has also assured the health care professions and representatives of patient groups, the health insurance schemes and the drugs industry, that all views will be taken into account.

These reports come from a correspondent with acknowledgements to the German pharmaceutical Press: *Deutsche Apotheker Zeitung* and *Pharmaceutische Zeitung*

Euro students

The inaugural conference of the European Pharmaceutical Students Association (EPSA) will be in Tübingen, Germany, in April.

Originally a regional subcommittee of the International Pharmaceutical Students Federation (IPSF), the founders of the EPSA decided that the rapid opening of Eastern Europe and the coming of the single market have made it necessary to withdraw from IPSF and form a group to deal specifically with European issues.

The new EPSA will continue the work of its predecessor in collecting and disseminating information for pharmacy students in Europe and organising the student exchange project.

It will continue the contacts with the Pharmaceutical Group of the European Community and hold annual conferences to which students from all countries in the enlarged Europe are invited.

Medical charts

Within the first few weeks of its existence, the news magazine *Focus* published results of a year-long survey to find the top 500 doctors in Germany.

Breaking the previous taboo on such comparisons, the first of 13 articles dealt with surgeons and physicians treating cardiovascular diseases.

The four criteria used to judge performance were: the frequency with which doctors performed certain operations or other forms of treatment, their scientific reputations as demonstrated by how often publications bearing their names were cited in papers by colleagues, the recommendations of 200 doctors asked to which specialist they would send a patient for a second opinion and finally, the number of times they attended, organised or presented papers at congresses and their membership of learned societies.

Further articles are planned.

Drug fraud

A pharmacist in Bochum has been accused of collusion with an AIDS patient to defraud a health insurance scheme of £300,000.

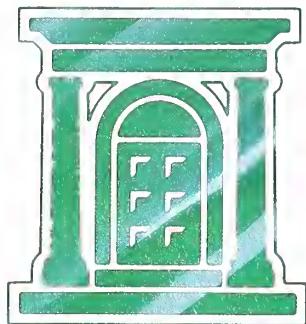
The AIDS sufferer, convinced of the efficacy of his expensive treatment with Roferon, was so upset when his doctor stopped prescribing it, that he was determined to find a way of obtaining it and started forging prescriptions.

These were quickly detected by the pharmacist, but the patient, discovering the pharmacist was living well beyond his means, persuaded him to continue forwarding the scripts for reimbursement.

Up to 150 ampoules were fraudulently obtained, but the pharmacist handed only a fraction over to the patient.

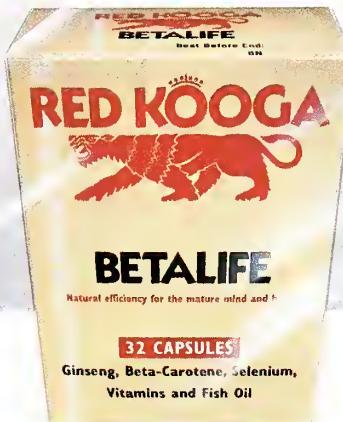
Another pharmacist and wholesaler had his appeal against a 15 month sentence for handling stolen goods upheld.

In his defence, the pharmacist refuted the prosecution's statement that the low price of the drugs offered to him should have raised his suspicions, saying that discounts of up to 60 per cent were common!



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Red Kooga Ginseng - the big, brand-leading name and your guarantee of top quality and top sales will be even bigger with the launch of an exciting, new product - Red Kooga Betalife.

Red Kooga Betalife is a new supplement with a winning combination of the antioxidants Beta-

Carotene, Vitamin C,

Vitamin E, and Selenium. Red Kooga Betalife also contains Fish Oil and the extra bite of traditional, high quality Korean Ginseng.

You'll receive healthy support when we launch our natural winner with press advertising, a big P.R. campaign and a range of eye-catching P.O.S.

As Red Kooga, Natracalm, Natrasleep, Rheumasol, Calcia, and now Red Kooga Betalife are from English Grains Healthcare, the leaders in natural healthcare, you know you have our guarantee of quality.



THIS YEAR WE'RE SPENDING £1 MILLION ON SUPPORTING OUR KEY PRODUCTS THROUGH EXTENSIVE PRESS ADVERTISING.


English Grains
HEALTHCARE

The name behind the great names

NEW

NICO



Kabi Pharmacia has used its unrivalled experience in smoking cessation to create a patch that closely reflects the needs of the smoker who want to give up.

Nicorette® Patch is unique in the field of smoking cessation by offering transdermal delivery of nicotine through the *waking hours only*.

Applied in the morning and removed before bedtime, Nicorette® Patch avoids night time administration of nicotine, *minimising the risk of sleep disturbance*¹ while giving just enough through the day to help beat the craving.

The nicotine plasma profile² of a typical smoker rises through the morning reaching a plateau through the afternoon and falls again while asleep.

Abbreviated prescribing information

Nicorette® Patch 15 mg, 10 mg and 5 mg. Presentation: Transdermal delivery system available in sizes (30, 20 and 10 cm²) releasing 15 mg, 10 mg and 5 mg of nicotine respectively 16 hours. In 3 editions. Treatment of nicotine dependence, relief of withdrawal symptoms associated with smoking cessation. **Dosage and Administration:** Nicorette® Patch should not be used concurrently with other nicotine products and patients must stop smoking completely when starting treatment. The recommended treatment programme should occupy 3 months. One Nicorette® Patch should be applied to a dry, non-hairy area of skin on the hip, upper arm or chest in the morning and removed at bedtime. Application should be limited to 16 hours within any 24 hour period. Patients are recommended to commence with one 15 mg patch daily for the first 8 weeks. Patients who have remained abstinent should then be supported through a weaning period, consisting of one 10 mg patch daily for 2 weeks followed by one 5 mg patch daily for a further 2 weeks. Patients should be reviewed at 3 months as abstinence has not been achieved, further courses of treatment may be recommended if it is considered that the patient would benefit. **Contra-indications, Warnings etc.:** Contraindications – Non smokers, children under 18 years, pregnancy, lactation, known hypersensitivity to nicotine or component of patch.

Precautions: History of angina, recent myocardial infarction or cerebrovascular accident, serious cardiac arrhythmias, systemic hypertension or peripheral vascular disease, history of peptic ulcer disease.

WORLD LEADER IN TREATMENTS TO HELP YOU STOP SMOKING

NICORETTE® Patch



On giving up smoking the loss of nicotine can result in many unpleasant withdrawal symptoms including craving. Studies show this *craving* arises through the day, reaching a peak at around 7 p.m.^{3, 4, 5, 6} A large survey⁷ of UK smokers report the most common occasions leading to relapse occurred during social occasions, and while drinking. Only 4% relapsed in the morning).

For more information on the Nicorette® range
or "FRESH START" materials, please ring our HELPDESK on
(0908) 603848
Answerphone after hours



er, diabetes mellitus, hyperthyroidism, phaeochromocytoma, chronic generalised dermatological disorders. **Warnings:** Erythema may occur. If severe or persistent discontinue treatment. **Interactions:** See full data sheet. **Side-effects:** Application site reactions (e.g. erythema and itching), headache, dizziness, nausea, palpitations, dyspepsia and myalgia. Other subjective sensations associated with smoking cessation or nicotine administered by smoking may occur. **Legal Category:** P. **Package quantities:** Cartons containing Nicorette® Patches in single nets in the following quantities: Nicorette® Patch 15 mg (PL 0022/0105) – packs of 7 (£9.07) and 28 (£36.28). Nicorette® Patch 10 mg (PL 0022/0104) – packs of 7 (£8.36). Nicorette® Patch 5 mg (PL0022/0103) – packs of 7 (£7.20). **Full prescribing information available on request from:** Kabi Pharmacia Ltd., Davy Avenue, Knowlhill, Milton Keynes, Buckinghamshire, MK5 8PH. **References:** 1. Fagerstrom, K.O., et al., J. Smoking-Related Dis., 1991 2 (2), 173-180. 2. Benowitz, N.L., et al., Clin. Pharmacol. Ther., 1982, 32 (6) 758-764. 3. Shiffman, S.M., 1979, The tobacco withdrawal syndrome: In: Krasnegor N.A., (ed) Cigarette smoking as a dependence process. NIDA Research Monograph 23, U.S. Department of Health, Education and Welfare, Washington DC pp 158-184. 4. Schneider, N.G. Psychopharmacology., 1984, 82: 143-144. 5. Gritz, E.R., et al., 1973, Proceedings of the 81st Annual Convention of the American Psychological Association vol 1 pp 1039-1040. 6. Gilbert, R.M. & et al., Psychopharmacology., 1982 78: 121-124. 7. Gallup, September 1992. **Nicorette® Patch is manufactured by Kabi Pharmacia.**

 **Kabi Pharmacia**

OUR CUSTOMERS GIVE UP SMOKING

The benefits of foresight

It is not often that a retailing consultant finds there is no little or no room to improve a business, but this week, with few reservations, John Kerry celebrates outstanding success

Five years ago when the two GPs opposite Mr M's corner pharmacy took advantage of the Government's generous finance schemes for new health centres and built one half a mile away, he went with them.

It wasn't that simple of course. Mr M bought an adjoining plot, fought hard to get planning permission for a pharmacy and, after months of sleepless nights and doubt, was able to open his doors for business on the same day that the health centre did.

In the meantime another two-doctor practice had been persuaded to operate from these new premises, providing Mr M with an unexpected bonus and a flying start.

The front door of this health centre is literally two paces from the pharmacy front entrance. Patients would need a very good reason not to get their prescriptions dispensed at this pharmacy. Few have and Mr M caters for more than 90 per cent of them. Only those with long standing loyalties to other pharmacies ignore the welcoming convenience of this shop.

Now there are five GPs the practices have amalgamated and are looking to expand their services further. There is a very healthy flow of patients from one building to the other, script items are substantial, touching 4,000 per month, and the dispensing business is growing very nicely.

Mr M claims that he can sell anything in this shop, but can he make a profit out of everything he sells? That's doubtful. He sells a lot of packet crisps. In fact he says jokingly that there's more profit in a packet of roast chicken flavour than a 27 plus pack of P...P... Proprietary brand of all-in-ones!

His aims for the future are to maintain good growth in the dispensary while finding the right tactics to persuade customers to buy more counter lines. No different, in fact, from everybody in retail pharmacy. This shop however, is somewhat out of the ordinary.

Mr M is aware that there are a good number of modern tactics which may boost his script business. Without a doubt his success is due to fast turnaround, good stock levels and friendly advice, not forgetting a superb location.

It's a "good earner," this one and, as Mr M said on the

phone, "I reckon I've got it right already, but I'd be interested to hear what you think".

Well let's face it, he has got it

Trading conditions:

Limited company

Modern purpose-built pharmacy adjacent to health centre

No other shops nearby

Nearest competitors: two retail pharmacies, both 1/2 a mile away

Mixture of pre-war and modern housing nearby

and other 40 per cent.

Busy spells

The pharmacy has five part-time assistants and at any one time there are three or even four working. With till takings averaging around £200 a day, you may be wondering how they occupy themselves. Luckily — or was it planned? — four out of the five are keen and competent dispensers,

Sales
Opening stock
Purchases
Closing stock

GP
Salaries/marketing
Motor expenses
Telephone
Print & post
Sundry
Auditors
Legal & professional
Bank charges
Directors' fees
Pension
Depreciation, motor
Depreciation
Establishment

Net profit

	Year ending Oct 91 (£)	Year ending Oct 92 (£)
Sales	375,000	460,000
Opening stock	27,000	30,000
Purchases	283,000	359,000
Closing stock	(30,000)	(35,100)
GP	95,000 (25%)	106,100 (23%)
Salaries/marketing	25,000	
Motor expenses	2,000	
Telephone	700	
Print & post	800	
Sundry	2,100	
Auditors	1,800	
Legal & professional	1,500	
Bank charges	900	
Directors' fees	16,500	
Pension	1,000	
Depreciation, motor	4,200	
Depreciation	1,200	
Establishment	8,000	
	65,700	69,000
Net profit	29,300 (7.8%)	37,100 (8.1%)

right. In five years, because of a smart move, he has built a substantial and profitable community pharmacy and it's all his. Well, apart from Mrs M

turnover is NHS, leaving £70,000 in counter takings. The counter can be broken down into three categories: medicines 35 per cent, baby 25 per cent

taking much of the weight from Mr M during busy spells.

Looking at the shop plan, you will see that the dispensary occupies only 80 square feet of the square shop, the remaining 470 sq ft being the sales floor.

The shop is laid out in such a way that one can draw a diagonal line from one corner to the opposite corner to divide the shop into two. On one side of the line are the dispensary, medicines and baby products. On the opposite side, everything else.

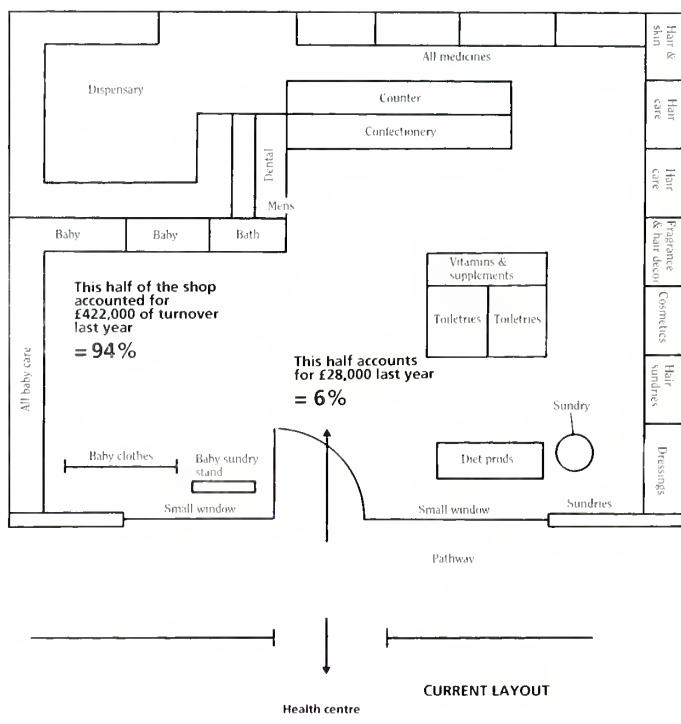
The turnover from the dispensary, medicines and baby half adds up to £422,000. The other half yielded £28,000 last year or about £500 per week. This represents rich pickings in the dispensary half — £30 per sq ft per week.

The poor half of the shop displays toiletries, cosmetics, hair care and so on and there is even a glass case for fragrances, though it is rarely opened.

Naturally Mr M would like to see more money in the till, but isn't sure that there's much potential for growth.

In truth, the situation isn't ideal for retail growth. The majority of people who cross the threshold have just left the surgery: patients, expectant mums and mums with babies.

The majority of the other customers have popped in for a



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OUR PARKE-DAVIS
WARNER MEDICAL
REPRESENTATIVE
WITHOUT DELAY

You'll be seeing a great deal of Diclomax Retard

PRESCRIBING INFORMATION

Presentation:

Opaque white capsules containing 100mg diclofenac sodium in a modified release formulation, manufactured using the Diffucap® process.

Indications:

Adults: Rheumatoid arthritis, osteoarthritis, low back pain; acute musculo-skeletal disorders and trauma such as periarthritis, tendinitis, tenosynovitis, bursitis, ankylosing spondylitis, control of pain and inflammation in orthopaedic, dental and other minor surgery. Not suitable for children.

Dosage:

One 100mg capsule daily, preferably with or after food. Non-steroidal anti-inflammatory drugs should be used with particular caution in elderly patients, and the lowest effective dose used.

Contra-indications:

Known sensitivity to diclofenac sodium, peptic ulcer or gastro-intestinal bleeding, asthmatic patients in whom attacks of asthma, urticaria or acute rhinitis are precipitated by aspirin or other non-steroidal anti-inflammatory agents.

Precautions:

Patients with a history of severe renal, cardiac or hepatic impairment, gastro-intestinal disease, bleeding diathesis and the elderly should be kept under close surveillance. Porphyria. Pregnancy and lactation. Co-administration with lithium, digoxin, anti-coagulants, cyclosporin, methotrexate, potassium-sparing diuretics or other non-steroidal anti-inflammatory drugs.

Side-effects:

Occasionally reported: epigastric pain; other gastro-intestinal disorders, headache, dizziness, vertigo, rashes or skin eruptions and elevation of serum aminotransferase enzymes.

Legal category:

POM.

Product licence number:

4408/0017.

Product licence holder:

Thames Laboratories Ltd, Abbey Road, Wrexham Industrial Estate, Wrexham, Clwyd LL13 9PW.

Basic NHS cost:

£9.36 per blister pack of 28 capsules.

Date of preparation:

December 1992.
® Diffucap is a registered trademark of Eurand Intl. SpA. Further information is available from Parke-Davis Research Laboratories, Lambert Court, Chestnut Avenue, Eastleigh, Hampshire SO5 3ZQ Telephone (0703) 620500.

*Trademark

Parke-Davis Research Laboratories 1992.

A530-UK-Jan93



New Diclomax Retard is being heavily promoted nationally to GPs by Parke-Davis, both in the medical press and via two field forces.

So from now, GPs all over Britain will be prescribing Diclomax Retard.

Be prepared, talk to your local representative about deals now available.



ONCE DAILY
Diclomax * Retard

Diclofenac sodium 100mg modified release



GILLETTE SERIES PLUS GILLETTE SENSOR.

YOU'VE NEVER SEEN A PROFIT COMBINATION LIKE THIS IN THE MALE GROOMING MARKET.



We only launch products when we're certain they're better than anything else around. So here's the new GILLETTE SERIES – the best researched, best supported male grooming range in retail history. If it's new and bigger profits you're after – here they come!

- ▼ 8 million existing GILLETTE customers will want to buy.
- ▼ Sensor achieved over a 50% market share of systems razors during the launch year.
- ▼ £15 million launch spend. Britain's biggest ever launch for men's toiletries. TV, press, posters.
- ▼ 5 million samples. ▼ 14 million colour brochures.
- ▼ 70,000 men tried the products. They said they're what they wanted. ▼ 3 years and £50 million in developing the best researched products ever.
- ▼ "COOL WAVE" – a totally new fragrance across the range.

Gillette®

The Best a Man Can Get™



counter medicine. They buy the toiletries, hair care and dental products it seems, only because they've run out before they can get to their normal town centre shop or supermarket.

Although Mr M prices these lines competitively, he has neither the space to merchandise them well nor the local reputation to sell value for money.

With the exception of baby care, most of the non-medical counter products are merely service items. This situation is unlikely to change for the following reasons:

- Customers are mostly patients.
- The pharmacy is isolated from other shops — people don't pop into Mr M's pharmacy.
- Because of planners, the pharmacy doesn't look like a shop from the main road it is on. It is unlikely to attract a passing trade.

Future pointers

There are, however, pointers for the future which indicate that, with the right tactics, sales can be boosted.

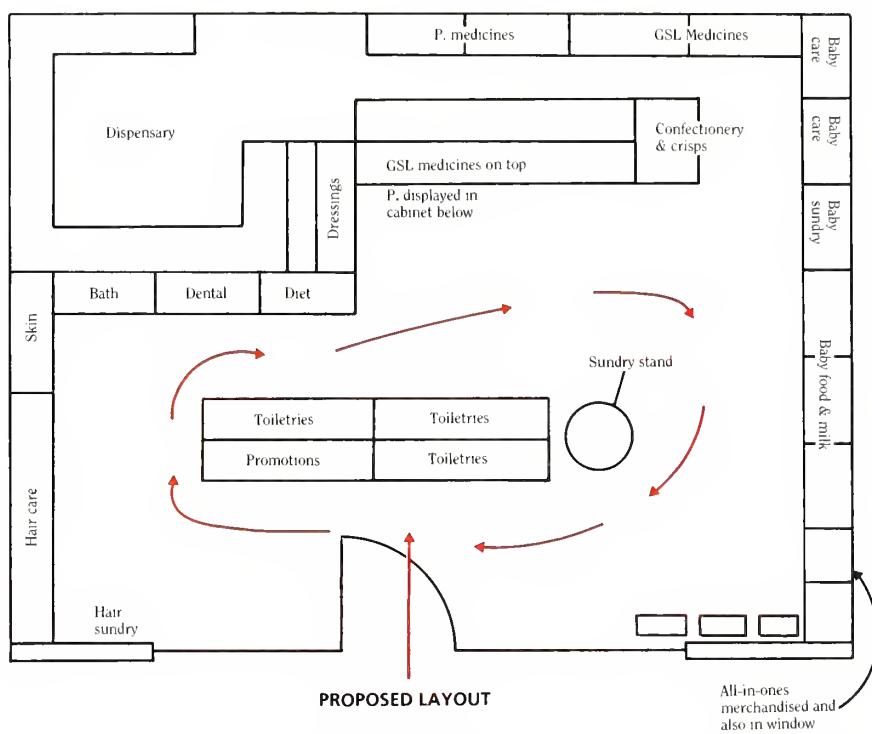
The pharmacy has two relative retail strengths, medicine and baby care. Additionally Mr M maintains keen prices, although the local community seems to be largely unaware of them.

However, the layout of the shop leaves a lot to be desired. The strong departments need to be accentuated.

Medicines occupy a lot of shelf space behind the counter — that's fine, but the counter looks more like a tuck shop, while the glass cabinets built into the counter display giftware and fragrances, items which have a very poor turnover.

Recommendations

1. Display top brand GSL and P medicines in the cabinets.
2. Site more GSLs on the counter.
3. Display more company promotional material to support TV advertising and leading brands.
4. Move other associated medical lines, currently at some distance from their brothers, to fitments adjacent to counter medicines. Dressings, sports injuries, vitamins and



supplements, dietetics are all in this category.

The baby care business is substantial but it could be better. It occupies several fitments, but it is poorly merchandised and could do with more space.

Three infant food brands are stocked, but not one of them is a complete range and they don't look very attractive. Tins and jars generally look better with company-provided shelf dividers and merchandising material.

On the whole then, they would be better kept all together, vertically merchandised, with the infant formulae, drinks and rusks not spread across four fitments and intermingled with non-baby products. Three full length fitments would be best.

All-in-ones can be found at the foot of four or five fitments and in both windows in packs built into low-level walls, looking for all the world like an unfinished game of Mah Jong.

All-in-ones are sold virtually as loss leaders, claims Mr M. The best place for them is in the

space next to the right band window and all together.

The rest of the wall should be taken up by baby toiletries and sundries.

The space vacated by baby care should be used for cosmetics, skin care, sanpro, personal hygiene and hair colorants. These products do not sell well, therefore the choice needs to be substantially reduced.

Other toiletries, household goods, paper products and the planned monthly wholesaler promotions could be effectively merchandised on gondolas.

Hair, chemist and baby sundries are believed to be outselling routine toiletries in this shop. This isn't surprising and they are much more profitable; more should be made of these. Hair and baby sundries each deserve a wall fitment of their own on the appropriate wall.

Mr M is about to introduce five heavily cut price brand-leading promotions a month and has always kept his prices competitive. However, the reaction of the locals to

these prices in the past has been negligible. Mr M should seriously consider door-to-door leaflets, window posters and bold in-shop displays to give these toiletry price promotions a chance in the future.

It is quite possible that toiletry price promotions in this pharmacy will fail miserably and, if this proves to be the case, they should be abandoned.

Every business can do more to increase its turnover. This is a superbly successful community pharmacy, while at the same time being an unsuccessful chemist's shop.

The future for this business is directly related to the health centre; that's where the customers, turnover and profit are going to come from. The counter medicines and baby business are relatively strong, but undoubtedly closely linked with the health centre. All other products are more or less non-profit service lines.

With a lot of concentrated effort and time they can be improved, but it may not be worth it.

Keep your Strepsils and Karvol units on display!

THE MYSTERY SHOPPER'S IN YOUR TOWN FOR ANOTHER 2 WEEKS!

Here for the eighth week! The Mystery Shopper is back by popular demand and Crookes Healthcare have pleasure in announcing this week's £75 cash prize winners. Sponsored by leading coldcare brands Strepsils and Karvol, the competition includes an overall £5,000 cash bonanza draw which will take place once all ten week's winners have been chosen for it. So watch this space — and keep your display units fully stocked. It could be you next time round as there are two more weeks still to go!

- P Parekh, Dallas Chemist, Falsworth, Manchester
- J S Wright, Fishergate Pharmacy, Fulford Road, York
- J T Kitchen, Chadwick Street, Moreton, Wirral
- G Priest, Brittens Pharmacy, Long Eaton, Nottingham
- M Patel, Frinton Rose Ltd, Evington Road, Leicester
- S Patel, Park Road, Loughborough, Leicester
- S Patel, Belgrave Road, Leicester
- S Nicholls, H Buckingham and Sons, Harborne, Birmingham
- J Nicholls, Nechells Park Road, Nechells, Birmingham
- Mr Shareef, Coventry Road, Yardley, Birmingham
- Mr Patel, Oldway Pharmacy, Paignton, Devon
- G Jones, The Broadway, Lambourn, Berks
- Mr Hambrey, Barbourne Pharmacy, Barbourne Road, Worcester
- Mrs Gudka, Western Road, Brighton, Sussex
- K Bull, J Aidsby Chemist, Whittlesey, Cambs
- Mr Patel, Mulberry Way, London
- B Bhadresha, Medirex, Lambeth, London
- F Scott, R Scott Pharmacy Ltd, Stramills Road, Belfast

MYSTERY SHOPPER

Unichem break the billion barrier

Unichem have achieved over £1 billion in sales for the first time. Moreover, the company has increased its pre-tax profits by some 49 per cent.

The key to Unichem's performance seems to be built on the back of marketing initiatives and closely controlled costs.

"Our growth in market share has been achieved by offering a high level of customer service

Sales up 14pc to over £1b
Pre-tax profit up 49pc to £31.9m
EPS up 14pc to 15.1p
Final dividend up 14pc to 3.75p

and innovative and commercially attractive marketing schemes," says chief executive Jeff Harris.

"The significant increase shown in 1992 has been achieved by vigorous control over operating and distribution expenses, continuing investment in warehouse automation and by gross margin improvement through better buying."

The company estimates that the market for prescription lines grew 11 per cent by value last year, while for OTC products it has been static. Against this background, Unichem report group sales up 14 per cent to

£1,048.7 million and pre-tax profits up 49 per cent to £31.9m.

Wholesale success

Sales in the wholesaling division show an increase of 14 per cent on a like for like basis. In this case, like for like means excluding inter-company sales and stripping out the Glaxo figures, as they went over to their agency scheme during this period. If the Glaxo numbers are included, the figures would still be "comparable", say Unichem.

Sales in the retail division look less spectacular, rising 8 per cent on a like for like basis, but this compares with an estimated 6 per cent growth in the retail market overall.

Moss Chemists, the heart of the retail division, is described as the group's "greatest success" in 1992. The division has grown from 130 pharmacies at the beginning of 1992 to 209 today.

Unichem also claim to have made great strides in the hospital sector. Sales are up 32 per cent to £28m, helped by a "breakthrough" with agency deals, as Unichem have won joint supply agencies for Zeneca Pharma (ICI), Merck Sharpe & Dohme, and Fisons in the recent past. Mr Harris relishes the potential for growth



Unichem chief executive Jeff Harris

in this market: "We still have a relatively small share of a large market," he says.

Unichem have also had a successful year with own brand sales which have increased 10 per cent over the year.

Going for gold

Unichem's Gold Partners programme has also been an outstanding success, so much so that the company has been forced to call a halt to new recruits.

"Our main aim was to use our growing retail expertise to offer better marketing to customers of our wholesale operation." The company had planned for around 1,000 to take up the scheme, plus the Moss chain. In fact, the 1,500 members the scheme has generated means Unichem have had to stop recruiting until June.

On the wholesaling side, Unichem are reviewing their warehousing and other facilities to seek out niche markets. As a beginning, the company has a deal with the sports injury products company, Medisport. "They do the marketing, we do the distribution for them," is how operations director Kelvin Hide puts it.

Sunday trading amendment Bill through Committee

Pharmacies which open on Sunday would be entitled to sell their full range of stock for a period of two hours under new provisions in the Shops (Amendment) Bill, which is designed to prevent the complete deregulation of Sunday trading in England and Wales.

The Bill, a private member's measure introduced by Ray Powell, one of the Labour MPs sponsored by the shopworkers union USDAW, has completed its Committee stage but has only an outside chance of becoming law.

Conservative MP Michael Alison, a prominent member of the Church of England and a leading supporter of the Bill, said it provided for a "two hour slot during which anything in a pharmacy can be sold".

He also explained that the Bill would permit newsagents and other outlets to sell contraceptives on Sunday, provided such sales did not account for

more than 20 per cent of their normal business.

The Committee also approved an amendment allowing pharmacies to supply, as well as sell, medicines to their customers.

The 14 MPs who served on the standing committee which considered the Bill worked through from 10.30am to midnight on Wednesday of last week to ensure that the Bill was able to return to the floor of the Commons for its report stage.

In the process, opponents and supporters of the Bill entered into a complex series of compromise deals which may well unravel when subjected to wider scrutiny.

Meanwhile, there seems little prospect of Government legislation to reform the 1950 Shops Act — designed to provide greater relaxation for Sunday trading in England and Wales than would be permitted by Mr Powell's Bill — becoming law until well into next year.

Rationalisation

As part of their rationalisation and automation programme, Unichem will open a new OTC depot at Mansfield in a couple of months time, replacing the existing Sheffield operation.

While Mr Harris says he has seen "signs of an upturn" in the sluggish OTC market in the past few weeks, he is reluctant to be drawn on whether this could mean an end to the recession.

The company's automation programme continues. "Five of our 11 distribution centres now have first stage automation whereby they can mechanically assemble around 50 per cent of all medical volume. At our largest centre in Preston, two automats now handle 80 per cent of medical volume."

Unichem have announced a final dividend of 3.75p, up 14 per cent and in line with the growth in earnings per share.

Numark give a hand...

Numark have launched a "Business Health Check" scheme to help pharmacies which may be adversely affected by the Department of Health's pay offer for 1993-94.

The scheme will offer a review of their target market and assistance in developing new sales opportunities. Help with local marketing initiatives will be given. Numark are currently designing a bespoke practice leaflet for members. Further information from David Wood. Tel: 0827 69269.

Searle numbers

G. D. Searle have changed their sales office phone and fax numbers to: 0494 521124 and 0494 536035.

February sales

Provisional estimates for the index of retail sales volume for February is 123 (1985=100). This seasonally adjusted figure is about the same as January's but nearly three points up on December.

Scotia board

Sir James McKinnon has been elected deputy chairman of Scotia Holdings. He joined the board last year.

Retail Prices up

The RPI for February is 138.8, up 0.7 on January.

Mam brokers

Mam (UK) have appointed the Miles Group as sales brokers for their baby care products from April 1.

Nom d'une nom...

Boots Pharmaceuticals UK will trade in the UK as Boots Pharmaceuticals Ltd from April 1.

...d'une nom

Cow & Gate Ltd have changed their name to Cow & Gate Nutricia Ltd.

Bradford Chemists Alliance profits soar

Wholesaling company the Bradford Chemists Alliance has had a successful financial year, with sales growing almost 19 per cent by value and profits up 40.2 per cent on last year's figure.

In his chairman's statement, Bruce Moss says: "The company has had an outstanding year, and gross sales showed an increase to £46.4 million. In spite of the continuing strictures of profitability of the National Health Service your directors have been able to

Sales up 19pc to £46.4m
Pre-tax profit up 40pc to £844,134
Retained profit £286,784
Final dividend up 12pc to £3.20

retain the shareholders' monthly settlement at last year's enhanced level."

Pre-tax profits for the company are up from £602,099 in 1991 to £844,134 last year.

A rights issue by the company

has been a success over the longer term: "The rights issue shares for which you paid only £16 four years ago have now almost doubled in value to £31.50 as well as having produced £11.10 in dividends in those four years," says Mr Moss.

Allowing for agency sales and discounts, the BCA have achieved a turnover of £36.6m compared to £34.4m a year previously. This represents an increase of 6.4 per cent. OTC accounted for 19 per cent of this.

During the year only 1,346 shares changed hands, and only then because two shareholders retired. These have been reissued, and the company now has nine new pharmacist shareholders.

The directors have proposed an increase in the rate of dividend of 17.5 per cent, from 142.5 per cent to 160 per cent. That is a dividend of £3.20 for each £2.00 share.

Warner-Lambert swallow Wilkinson Sword

Wilkinson Sword has been sold to Warner-Lambert for £100 million cash. The move finally ends the doubts about its future, brought about by Gillette's indirect interest in the company.

US and European anti-trust regulatory authorities have been concerned that Gillette's shareholding could be anti-competitive.

Now Wilkinson can sink or swim on its own merits.

The vendors of the shaving company were the Dutch company Eemland, in which Gillette have a 22 per cent stake.

For Warner-Lambert, the purchase expands their personal care portfolio. Wilkinson have sales of \$316m in the USA but only \$190m in Europe, mostly in Germany and Britain.

English Grains a jewel in Peter Black's crown

Interim results for Peter Black show the personal care, footwear and accessories company with a healthy profits improvement on a flat turnover.

The results reflect the group's ability to manage effectively in demanding times, according to the chairman's statement.

Sales up 1pc to £61.1m
Pre-tax profit up 27pc to £5.7m
EPS up 27pc to 7.05p
Interim dividend up 21pc to 0.93p

In the six months to November 28, pre-tax profits were £5.73 million, compared to £4.52m in 1991. However, sales put on £0.6m to £61.1m, a rise of just 1 per cent.

In the personal care division sales actually fell year-on-year, dipping from £22m in 1991 to just over £21m last year. However, Peter Black say that sales in toiletries and gifts have been satisfactory, though "cosmetics remain in a difficult

market". The decrease in turnover is attributed to the disposal of Farrow & Humphreys.

English Grains Healthcare, the subsidiary which numbers Natracalm and Natrasleep among its brands, has responded well to investment. £2.5m has been committed to plant and machinery over two years, while £1.5m was spent on advertising and marketing last year.

The group say that private label and dietary supplements sales have increased, and the brands have consolidated their position in the market. Peter Hodgkiss, the marketing director of English Grains, said: "November 1992 saw the launch of Natrasleep, our herbal aid to encourage natural sleep. Initial distribution and sales have proved encouraging".

Overall the group has achieved a rise in earnings per share of 27 per cent to 7.05p and a reduction in gearing to 9 per cent.

A dividend of 0.93p per share has been announced, up 21 per cent.

Bayer in the UK bucks 'disappointing' group trend

The Bayer group have been hit by the downturn in the chemicals industry. But in the UK, sales have shown modest growth.

Group sales for Bayer declined 2.8 per cent to DM41.2 billion, which the company attributes primarily to exchange rate movements.

"We took appropriate counter measures and continued our policy of consolidation," said Dr Manfred Schneider, chairman of the board of management. He explained that the disappointing results were due to the company's chemicals businesses, but that the health care businesses had

experienced "continued success".

Bayer's British operations achieved combined sales of £692 million in 1992. This represents an increase of 5.2 per cent on the group's performance for the previous year.

Pre-tax profits for the British operation, which includes Bayer plc, Agfa, Haarmann & Reimer and Miles, were £11.9m.

For the whole group, the operating profits fell 12.6 per cent to DM2.8 billion, "due primarily to lower sales revenues restructuring costs and a reduction in other operating income".

Coming Events

Monday, March 29

South Lincolnshire branch RPSCB A visit to the pathology lab at Grantham and Kesteven Hospital, followed by refreshments. Numbers are limited. Contact Joanne West, branch secretary on 0205 310996.

Tuesday, March 30

Durham county branch RPSCB "Blood monitoring" by Mr L. Andrews of Boehringer Mannheim UK (sponsors of the meeting) at 8pm in the Eden Arms Hotel, Rushyford.

Wednesday, March 31

Sheffield & District branch RPSCB "Practice pharmacy problems" at 8pm in the lecture theatre, The Jessop Hospital for Women. Pharmacists, Louise Freeman-Parry, Tony Hall and Peter Pratt will give case presentations. Meeting sponsored by Smith and Hill. Buffet in the Board Room at 7.30pm.

Advance information

Pharmacy Practice Resource Centre. Seminar on "Preparing and presenting research results" on April 5 in Taunton. Community pharmacists will have travel expenses refunded and contribution made towards locum fees. Cost is £45 including lunch (fee refunded to community pharmacists on attendance). Contact Fiona Potter on 0203 690064 for application forms.

Mersey Academic Pharmacy Practice Unit annual research conference, March 29, at the Senate Room, Senate House, University of Liverpool, starting 6.15pm. Details from Dr D.J. Wolfson (tel: 051-430 1203).

UK Association of Pharmaceutical Scientists. Annual conference at Exeter University from April 5-8. Programme and other details from Brenda Jackson on 0276 473363.

National Association of Women Pharmacists. Swansea weekend school from April 16-18. Details from Mary Gwillim-David on 0792 366527.

Society of Cosmetic Scientists. Symposium "Fragrance — more than just a pleasant smell" at the Stoke on Trent Moat House on April 19-20. Members £280 + VAT (non-members £360). Closing date April 1. Further details on 0582 26661.

College of Pharmacy Practice College Day and Annual General Meeting on April 28 at 1pm in Scarman House in the University of Warwick campus.

The Annual Address, entitled "Pharmacy Practice Research: goals and resources" will be given by Dr Phil Strong, senior lecturer in medical sociology at the London School of Hygiene and Tropical Medicine. There will also be a seminar entitled "Caring and sharing: The transfer of pharmaceutical care

between hospital and the community". Members and non-members of the CPP are invited to attend. Further details from the CPP on 0203 692400.

Marion Merrell Dow lecture in clinical pharmacy "Assessing the quality of pharmaceutical care" by Professor David Angram will take place on May 10 at 5.30 for 6.30pm in the Postgraduate Medical Centre Hope Hospital, Eccles Old Road Salford. Details from Mr. L. Goldberg, Room 708, Peel House Albert Street, Eccles, Manchester M30 0NJ.

National Association of Women Pharmacists 1993 Swansea annual weekend school will take place from April 16-18. The academic theme will be pain relief and the misuse of OTC medicines and opioids. Details from Mary Gwillim-David on 0792 366527.

Classified

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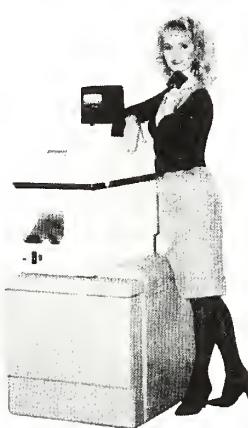
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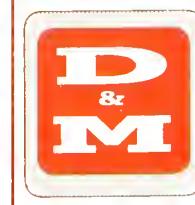
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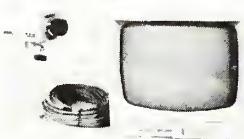
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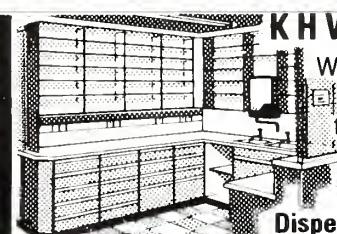
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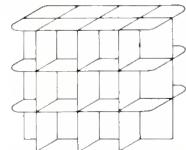
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About people

Two winners for Nurofen research grants

The two winners of pain study grants awarded by the Nurofen Pain Relief Project have been announced.

Neil Caldwell, a staff pharmacist from Glasgow Royal Infirmary, will investigate the analgesic policies of haemophilia units with a view to helping establish a standard approach to adult haemophiliac treatment throughout haemophilia centres.

Elizabeth O'Reilly, currently an undergraduate at Bath University, is also an award winner and will incorporate her research into her final year project.

Her work will look at the benefits and limitations of patient controlled analgesia for post-surgical patients.

Appointments

British Bio-technology Group have appointed **Ron Irwin FRPharmS** as commercial director. Mr Irwin joins the company from Marion Merrell Dow where he is chairman and managing director of its UK subsidiary.

In this newly established position he will assume responsibility for the planning and initiation of British Bio-technology's pharmaceutical sales and marketing activities.

Mr Irwin joined the pharmaceutical industry in 1960. During the following nine years he held appointments in sales, marketing, strategic planning and business development with ICI, The Wellcome Foundation and Sterling Winthrop Laboratories.

IN 1969 he joined Merrell Pharmaceuticals, ultimately assuming responsibility for the UK, Ireland, Scandinavia and The Netherlands. In 1981, Merrell was acquired by The Dow Chemical Company and subsequently merged in 1989 with Marion Laboratories.

Smithkline Beecham have appointed **Bradley Wilson** as chairman of the European business which now includes the markets of Eastern Europe. **Mitchell Cybulski**, former president of Bristol-Myers Squibb in Japan, has been appointed chairman of an expanded international division.



Staff pharmacist Neil Caldwell was one winner of the annual pain study grant awarded by the Nurofen Pain Relief Project...



...student Elizabeth O'Reilly (right) from the University of Bath, pictured with senior pharmacist Mrs Hannah Rees, was the other

Suzi Bailey has been appointed to the buying department at Unichem as OTC and Sundries buyer.

Pasteur Merieux have appointed **Clare Corcoran** as an international product manager from their UK subsidiary's specialist. Clare who has a BSc in biochemistry joined Merieux UK three years as a representative in the London area.

Aerosols International have appointed **Keri Alchurch** as works director.

The Boots Co have appointed **Michael Gates** as head of public relations for their international ethical, healthcare and contract manufacturing businesses. He will be based at Boots' Nottingham headquarters and joins from Cyanamid. He has previously held PR positions with Warner-Lambert and Lilly Industries.

Michael Julien has been appointed as a non-executive director of Medeva Plc and chairman of its audit committee. He is also a non-executive director of Guinness and Chiltern Financial Services. Mr Julien is a chartered accountant.

Barrister and television presenter **John Taylor** has been appointed a non-executive director of North West Thames Regional Health Authority.

Boots staff help bomb victims

Boots the Chemist staff were among the first helpers on the scene when the Warrington bomb exploded outside the shop last weekend.

Two trained first aiders, Lesley Dutton and Ian Haigh, treated the injured as best they could until the ambulances arrived. Several people came into the pharmacy for assistance after the explosion, a spokesman said.



Generics manufacturer APS Berk have made a major contribution to a consignment of essential medical aid for Bosnia. It is awaiting distribution from a warehouse in Zagreb. APS Berk have been thanked by Dr Alvi of the Manchester Royal Infirmary who co-ordinated the delivery. Dr Alvi is seen here with children on the streets of the devastated city of Mostar



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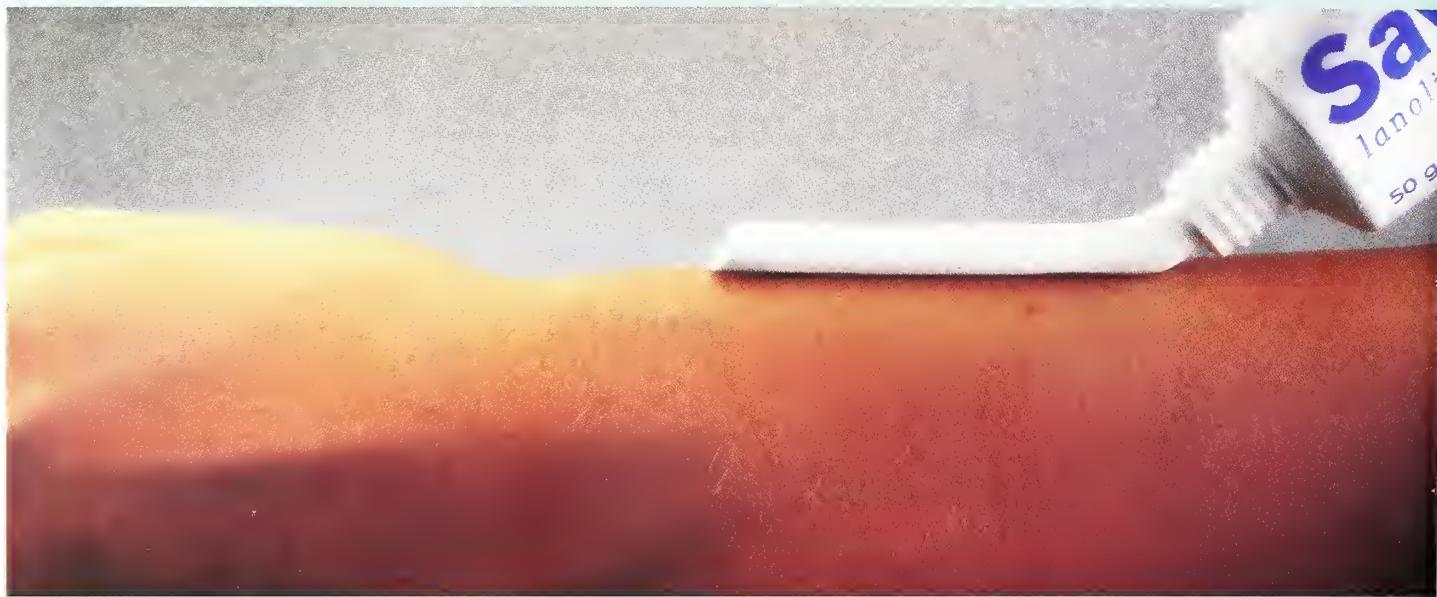
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*Source: F.S.A.

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